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Education  
Trust**

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# Good Autism Practice Report: Full Report

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## List of abbreviations

Abbreviation	Stands for
AET	Autism Education Trust
ASD	Autism spectrum disorder
ACER	Autism Centre for Education and Research
CYP	Children and young people; child or young person
DfE	Department for Education
DoH	Department of Health
DSM	<i>Diagnostic &amp; Statistical Manual of Diseases</i> (American Psychiatric Association)
EHCP	Education and Health Care Plan
FE	Further Education
NAS	National Autistic Society
PDA	Pathological Demand Avoidant
PLASN	Pan London Autism Schools Network
PF	Progression Framework
SCERTS	Social Communication Emotional Regulation Transactional Support
SENCo	Special Educational Needs Coordinator
SEND	Special Educational Needs and Disability
TA	Teaching assistant



## Important Information

This report was first published in 2009 and a second iteration was published with updates in 2019. Since the most recent report was published, the AET has been through a process of redeveloping its Professional Development Programmes. The Programmes currently in place are structured around the four key themes and the eight principles of good autism practice outlined in this report. Some of the language we use across our materials has changed since this report was written and we have evolved through the co-production of our materials. The report will again be updated in the future to reflect this.

To view our latest [Terminology Guide](#) please [click here](#).

## Structure of the report

This report consists of a set of guidelines written by members of the Autism Centre for Education and Research (ACER) at the University of Birmingham. The guidelines have been generated from a review of the research evidence, current policy documents, expert opinion, statutory guidance and from the accounts of autistic individuals. They identify eight key principles of good autism practice in education. These principles are designed to support settings across the age range from Early Years to Post-16 to develop their practice. We hope that staff will use their professional judgement to adapt practice to their own settings, as all settings are different, as are the needs of individuals. A separate report, written by Integra, presents eight case studies that have been chosen to illustrate these principles and to show how some settings have adapted their practice to meet the needs of CYP (children and young people) with autism. These guidelines make reference to these case studies in the relevant sections. Further references and resources that illustrate aspects of each principle are also provided in the relevant sections. The project was managed by Dr Glenys Jones, Honorary Lecturer within the Autism Centre for Education and Research at the University of Birmingham, and editor of the Good Autism Practice Journal.

### About the guidelines

These have been developed for practitioners in Early Years, Schools and Post-16 education. They were commissioned by the Autism Education Trust (AET) and were written by Professor Karen Guldborg, Dr Ryan Bradley and Dr Kerstin Wittemeyer. Jo Briscoombe and Claire Phillips from Integra wrote the case studies and Dr. Glenys Jones was project manager. She also supported the team in writing the guidelines and the case studies.

### About the Autism Education Trust (AET)

The AET partnership focuses on enhancing the knowledge, understanding, skills and practice of staff in Early Years provision, Schools and Post-16 settings. A key aim of the AET is to meet the needs of the education workforce. One way of achieving this is through the creation of a Continuous Professional Development programme consisting of the AET Autism Standards, the AET Autism Competency Framework, three tiers of training and a Progression Framework. The AET programme has been delivered to approximately 220,000 practitioners in England to date (July 2019), with over 60 of the 162 local authorities involved.



## About the Autism Centre for Education and Research

The Autism Centre for Education and Research (ACER) is based in the Department of Disability, Inclusion and Special Needs at the School of Education, University of Birmingham. ACER's research recognises the diversity of the autism spectrum population and the need to adopt an eclectic person-centred ethos. Members of ACER have worked together with the AET partnership since the AET's inception in 2007. ACER members led the development of the initial school-based programme, the Early Years programme and the Parents and Carers Guide.

## About Integra

Integra is the trading arm of South Gloucestershire Council and offers a wide range of services to educational establishments and businesses across South Gloucestershire and beyond. Services for schools include behaviour support, inclusion support, education welfare, therapeutic services, speech and language, governors, school finance, IT, HR, cleaning and catering. Integra provides the AET's training hub for Early Years for South Gloucestershire, and a Schools training hub in South Gloucestershire and Bristol.

## Acknowledgements

With many thanks to the staff in Early Years, Schools and Post-16 provisions that agreed to share their practice. Thanks also to the AET Youth Panel for their views and to all those working in the AET training hubs who gave suggestions on which settings might provide some good practice examples.



## About the authors

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Dr Karen Guldberg is Professor in Autism Studies, University of Birmingham and Director of the Autism Centre for Education and Research (ACER). Her research focuses on educational approaches and practice, the training needs of practitioners, and technology enhanced learning for autistic pupils. Karen runs the first year of a Masters programme in autism studies by distance learning. She has also been involved in producing a number of online training resources for educators as well as health practitioners. She led the development of the Autism Education Trust partnership school-based training and the adaptation of this to Early Years. She has been principal investigator on research projects working in partnership with schools, practitioners and parents. Recent international research includes leading an Erasmus Plus strategic partnership (2014–2017) to research good autism educational practice in Greece and Italy and conducting research for the World Innovation Summit for Education (WISE) on how to improve autism education in Qatar.

### Dr Ryan Bradley

Dr Ryan Bradley is a manager for the Communication and Interaction Team in Oxfordshire. This service supports the inclusion of children and young people with communication and interaction needs in schools, including those on the autism spectrum. He has collaborated extensively with ACER on various research projects and on the development of training programmes for the Autism Education Trust. He was a lead author of the AET Schools and Early Years programmes and recently revised the Early Years training materials, National Standards and Competency Framework. Ryan also developed the AET *Receiving and Understanding a Diagnosis* materials on autism and co-wrote the *AET Parent Guides*. He worked as a Research Associate with ACER on the Erasmus Plus strategic partnership project to research good autism educational practice in Italy and Greece and on the project to develop autism education in Qatar for the World Innovation Summit for Education (WISE).

### Dr Kerstin Wittemeyer

Dr Kerstin Wittemeyer has been a lecturer in Autism Studies at the School of Education, University of Birmingham, for a number of years. She led on the campus-taught autism programmes at the School of Education. Kerstin's PhD was an evaluation of an eclectic early intervention approach for children with autism in Toulouse, France. Since joining the Autism Centre for Education and Research (ACER) in 2009, Kerstin has taken part in and led on several projects funded by the AET, including the report on *Educational provision and outcomes for people on the autism spectrum* in 2011 and the development of the AET autism competency framework in 2012. For a number of years, Kerstin was part of a unique project in London called the Pan London Autism Schools Network (PLASN) Research group, a partnership project between specialist autism schools and autism researchers from different universities.



## Jo Briscoombe

Jo Briscoombe (BEd (Hons), MA Education) has worked in education for 26 years. She is a Teaching and Learning Adviser for Integra and is the service and team leader for Integra's Inclusion and Behaviour Support teams. Jo's role involves advisory work with schools and covers a wide range of activities including school improvement, school review, moderation, and online safety support and technology. As the lead for professional development for School Support in Integra she oversees a comprehensive programme of conferences and events. She is also a Lead Moderator for KS1 and KS2 and an accredited assessor for the ICT and online safety marks. Previous national work has involved the delivery of the National College Strategic Leadership in ICT programme, as well as delivering Lead Teacher training and producing materials for the Primary Strategy.

## Claire Phillips

Claire Phillips (BEd (Hons) and MEd Inclusion and Autism) has worked in education for 33 years and is South Gloucestershire's Local Authority Autism Adviser through Integra. She is the Autism Education Trust (AET) Training Hub Lead for South Gloucestershire and Bristol. Her role involves work with mainstream and special schools across all age groups, providing expert advice and training around autism to teachers, teaching assistants (TAs), SENCos, head teachers, senior leadership teams and parents. Claire has also trained and supported parents and carers extensively through Cygnet, NAS EarlyBird Plus (parents' programmes) and through Integra's Autism South West service, which provides autism support, conferences and networks for professionals and parents. She is commissioned by the Local Authority to provide guidance and advice around autism and she also sits on a multi-agency local autism group. Claire is also Vice Chair of Governors at a Free School for autistic pupils.

## Dr Glenys Jones

Dr Glenys Jones is a Chartered Psychologist and an Honorary Lecturer within the Autism Centre for Education and Research (ACER) at the University of Birmingham. She has been engaged in research into educational interventions for autistic children and adults for over 30 years and is Editor of the *Good Autism Practice Journal*, published by BILD. She currently works within a diagnostic service in the West Midlands set up to assess adults who are thought to be on the autism spectrum. For the Autism Education Trust, she led on the work in 2008 which identified the issues and challenges in education and also on the Standards in Autism Education for schools and educational settings (5–16). She was also involved in producing the AET Parent/Carers' Guide. Glenys has been a member of the AET Programme Board since its inception and is a Trustee of Autism West Midlands which provides services for autistic adults and supports and advises families, carers and children and young people.





# Literature Review and the Eight Principles

Professor Karen Guldberg

Dr Ryan Bradley

Dr Kerstin Wittemeyer

## Introduction

Autism affects how people perceive, communicate and interact with the world. Around 700,000 or 1 in 100 people in the UK have been identified as being on the autism spectrum according to current estimates<sup>(1)</sup>. Within England, figures from the Department for Education show that the number of children and young people who have autism as their primary SEND need has increased year on year from 66,195 in 2011/12 to 119,909 in 2017/18<sup>(2)</sup>. This means that all Early Years, School and Post-16 staff are very likely to work with autistic Children and Young People (CYP) at some point in their career.

Despite recent developments in awareness and recognition of autism, there is still a long way to go in understanding what it means to be autistic or to know how to support an autistic individual throughout their life. In the UK, for example, a recent survey by the All Party Parliamentary Group for Autism (APPGA) found that 60% of young autistic people said that having a teacher who understands autism is the main thing that would improve their experience of school<sup>(3)</sup>. Another APPGA report survey undertaken with 308 teachers found that it is still the case that fewer than half of those teachers say that they are confident about supporting a child with autism<sup>(3)</sup>.

Several studies have suggested that a lack of autism knowledge in teaching staff can negatively impact on the school experiences of autistic children and their opportunities to succeed<sup>(4,5)</sup>. In the UK, over 70% of autistic pupils attend mainstream schools. In these settings, without an understanding of autism, teachers are likely to apply their knowledge of mainstream or general education to autistic learners, rather than basing teaching on the different needs of the autistic learners<sup>(6)</sup>. As autism is a complex condition that impacts daily functioning, autistic CYP require distinctive supports and assistance to be successful<sup>(7,8)</sup>. Educational practitioners need knowledge of the likely challenges facing autistic CYP in educational settings and effective educational practices to address these<sup>(7)</sup>. When settings understand autism and make adjustments to the physical, sensory and social environment and to the curriculum, autistic CYP are able to learn and succeed.

## The Autism Education Trust

The AET was launched in November 2007 with support and funding from the Department for Education (DfE) in England and consists of a unique partnership involving the voluntary, public and private sectors. It is dedicated to coordinating, supporting and promoting effective education practice for all children and young people on the autism spectrum. Central to this has been the development of the AET Early Years, Schools and Post-16 programmes, which offer professional development for all staff working with CYP on the autism spectrum. The AET programme is underpinned by research. The underpinning research includes a scoping study<sup>(9)</sup>; a systematic international literature review<sup>(4)</sup> and an outcomes study<sup>(10)</sup>. These research studies influenced the creation of the original AET schools programme as well as its methodology and content.



Key findings from these studies were that practitioners need training that can help them develop good pedagogies for autistic students alongside the identification of the key characteristics that contribute to an effective school placement<sup>(4,9)</sup>, and that lack of autism expertise was identified as a barrier to good adult outcomes<sup>(10)</sup>. Findings highlighted that *all* school staff need knowledge of the autism spectrum and effective strategies<sup>(4,9,10)</sup>. The main research finding that shaped the methodology of the AET programme was that there is a notable lack of empirical evidence to inform practice and policy with regard to what ‘good practice’ means in the classroom and how effective and appropriate practice can be achieved<sup>(4,10)</sup>. This highlighted the need for collaboration between researchers and practitioners to establish what works best.

The findings shaping the *content* of the AET programme led to the development of the four themes through which it was structured. The theme of *A Unique Child* was underpinned by findings highlighting the importance of consultation with autistic pupils and on focusing on the strengths of autistic people rather than deficits<sup>(4,9)</sup>. *Positive relationships* was informed by the findings that peer interaction and relationships along with effective engagement with and support for families is crucial<sup>(4,9,10)</sup>. *Enabling environments* articulated the transactional conceptual framework and autism as a different rather than a disordered way of being<sup>(4,9,10)</sup>. The theme of *Learning and development* drew on the findings that functional spontaneous communication and language, social understanding and joint attention are the crucial developmental areas to focus on when educating autistic pupils<sup>(4)</sup>.

Each of the AET Early Years, Schools and Post-16 programmes has three core modules of training. The first module is basic awareness-raising aimed at all staff (including office staff, taxi drivers and support staff). A second module provides more in-depth training with practical knowledge, hands-on tools and techniques for all staff working directly with pupils on the autism spectrum (including tutors, staff, teachers and TAs). The third module is for people in leadership roles (e.g. lead practitioners, Special Educational Needs Coordinators and Inclusion managers). The training is relevant for the workforce in all types of educational setting from mainstream to special schools, working with autistic children and young people at all levels of ability.

Alongside the professional development materials, an AET Autism Competency Framework sets out the key understandings and knowledge required by staff working with children and young people on the autism spectrum for each of the three age phases. This provides a framework for staff to audit the skills they feel they have and to identify any gaps. Online materials illustrate how staff can provide evidence for competencies and it is designed for staff appraisal in a positive way, acknowledging strengths and areas for development. In addition to the professional development materials and the AET Autism Competency Frameworks, the AET Autism Standards set out the key areas of practice and provision within a setting that underpin good practice in autism. There is a separate set for Early Years, Schools and Post-16 settings and these are free to download. So, current practice can be audited by examining policies, systems and whole setting approaches. The AET autism standards are closely aligned with the AET autism competency frameworks, so that an action plan can be developed and followed. The three main components of the professional development materials, the AET autism competency frameworks and the AET autism standards are closely interlinked with each other.

The AET programme has now been delivered to 220,000 practitioners in England, to date. Independent evaluation work has revealed change at individual, class and setting levels as a result of practitioners participating in the AET programme. Enhanced knowledge, improved awareness and understanding, and more effective approaches, strategies and practical



changes were found to be maintained after four terms, following the initial professional development<sup>(11,12)</sup>. The AET autism standards and the AET autism competency frameworks have also supported a number of local authorities (LAs) to enhance their autism provision and educational practice. The Communication and Autism Team from Birmingham Local Authority, for example, have implemented the programme for use in 420 schools<sup>(13)</sup>. They published guidance on how LAs can use the AET Schools Programme within their local offer as part of the new Special Educational Needs and Disabilities (SEND) policy framework, stating that *‘the standards enabled us to evaluate our provision and practice in a systematic way and gave us a clear framework for development’*<sup>(14)</sup>. Many other local authorities have also brought the AET programme into the centre of the LA’s provision. Nationally, the AET programme is referenced in the Special Educational Needs and Disability Code of Practice<sup>(15)</sup> and signposted as key training. It is also highly commended in the All Party Parliamentary Group for Autism report in 2017<sup>(16)</sup>.

## The aims and structure of this report

Given that the original AET materials were underpinned by research evidence, it is now timely to examine the recent evidence base, as well as key policies and the messages from the autistic community, and to identify further priorities in updating the current AET programme. In recent years, there have been several important reviews and reports, in addition to papers published in the main autism and related special education and psychology journals. There have also been reports published by the All Party Parliamentary Group for Autism in 2012 and 2017 and the National Council for Special Education specifically on autism and education<sup>(17)</sup>. In addition, the National Autism Project published its findings<sup>(18)</sup>. Ofsted has recently updated its inspection frameworks for Early Years, Schools and Post16 settings on how the needs of those with SEND, including autism, are best addressed. This guide therefore aims to build on positive developments in recent years and to identify current challenges and potential solutions for educational settings in ensuring good educational processes and outcomes for autistic children and young people with autism from Early Years to Post-16.

The aims of this report are twofold:

1. To define good autism practice and the principles that need to underpin this in education, so that this can guide practitioners, from Early Years to schools and through to Post-16 education.
2. To inform the continued updating and development of the AET programme.

Before outlining eight key principles for good autism practice in education, we provide the readers with:

- Comments on terminology
- A short summary about the autism spectrum
- Approaches to teaching children and young people on the autism spectrum
- Key priorities that have emerged from this report
- Perspectives from the AET young people’s panel.



## Terminology

Terminology is a widely debated issue in the autism field and there is no single universal way of describing autism for practitioners apart from reference to the diagnostic criteria. Terms that are used in settings, schools and local authorities include *autism*, *autism spectrum condition*, *autism spectrum disorder* and, simply, *on the autism spectrum*. The authors of this report see autism as a different rather than deficient or disordered way of being. So, the term *disorder* is not used when describing people with a diagnosis of autism.

Whether to use ‘person first’ language or not is also widely debated (e.g. *autistic person* or *person with autism*). Kenny *et al.* (2015) gathered the views of different stakeholders and found that the term *autistic* was preferred by a large percentage of autistic adults and their families, with the term *on the autism spectrum* being endorsed by the majority of professionals<sup>(19)</sup>. Many autistic individuals see autism as a core part of their identity, and so see themselves as autistic rather than *with autism*. However, not all autistic individuals view their autism in the same way. There are some young people who do not see autism as central to their identity, and would therefore prefer the term *with autism*. So, the debate about terminology is complex. In this report, the terms *with autism* and *autistic* are used interchangeably to acknowledge different perspectives. Throughout the report, reference is made to *autistic individuals/CYP* or *individuals/CYP on the autism spectrum* to include all those who have a diagnosis of autism or any other autism spectrum condition.

## The autism spectrum

Autism is a lifelong neurodevelopmental condition that affects how people perceive, communicate and interact with the world. Autism is referred to as a spectrum condition because, while there are similar core areas affected, each child or person diagnosed will experience them differently. In the 1980s, it was estimated that there were only 4–5 per 10,000 people with autism. Today, estimates suggest as many as 1 in 100 meet the current criteria for a diagnosis<sup>(20,21)</sup>. This increase has arisen partly because the diagnostic criteria have changed and widened over time and there is now much greater awareness, information and knowledge about autism. In the early days of autism in the 1940s and for the next four decades, it was thought that most people with autism also had a learning disability, but it is now known that only a third of the autism population are learning disabled and two thirds are of average or above average intellectual ability<sup>(54)</sup>. To make a diagnosis on the autism spectrum, there must be evidence of difference (from typical development) in the following core areas and that the person’s everyday life has been and continues to be affected by these:

1. social communication and interaction (including non-verbal communication and the ability to use and understand body language, eye contact, facial expression and gestures; and the development and maintenance of friendships and relationships)
2. restricted and repetitive patterns of behaviour, interests or activities (including repetitive speech or movements; adherence to routines or resistance to change; or intense interests) sensory perception and responses.

In education, there are four areas of difference in an autistic CYP that can impact on learning. It is vital that staff acknowledge that autistic CYP may have different ways of:

- Interacting, playing and developing relationships
- Processing information
- Taking in and perceiving sensory information
- Communicating, understanding and using language.



Like all children and young people, individuals will vary in terms of their intellectual ability, their personality, their profile of strengths and needs, and the presence of other conditions (e.g. learning disability, ADHD, epilepsy) and their life experiences. For those in education, labels serve as a signpost and can be helpful but, for all CYP, teaching staff and parents should base their actions and strategies on the needs of the CYP. These should be identified by close observation and assessment across settings and situations and in consultation with the CYP concerned, wherever and whenever possible.

## Subgroups within the autism spectrum

Since autism was first identified, there have been a number of attempts to define different subgroups in recognition that not all autistic individuals share the same characteristics. For example, there have been three terms used to describe CYP who do not have a learning disability. These are Asperger Syndrome, High Functioning Autism and Able Autism, the latter two terms being used for those people who had language delays in childhood, whereas those with Asperger syndrome developed speech at the usual age. However, research has shown that it is very hard to separate out these three groups in adulthood as many who had language delay as young children learn to speak fluently and become very articulate as they get older. The terms High Functioning Autism and Able Autism have also been criticised as autistic CYP individuals rarely perform at a high level across all areas of everyday life and learning. Their profiles are often much more uneven than in the typical population, with peaks of ability and talent, and areas where ability and functioning is much lower than one would expect relative to their intellectual ability.

## Pathological Demand Avoidance

A further subgroup, Pathological Demand Avoidance (PDA), has also been suggested as part of the autism spectrum. Professor Elizabeth Newson first suggested this in a paper published in 2003<sup>(23)</sup>. As an experienced clinician with several years experience of assessing autistic children, she identified a group who were similar to those with autism but who were much more avoidant than autistic children and who did not appear to respond to some of the educational approaches found to be effective in autism. Since that time, clinicians and researchers have been attempting to establish whether there are clear and distinct differences between PDA children and those with autism<sup>(54)</sup>. As yet, there is insufficient evidence and PDA has not met criteria for clinical validity for acceptance in either DSM 5 or ICD 11. That said, different strategies have been developed for CYP with a PDA profile; there is an increasing literature on PDA<sup>(e.g. 24,25)</sup>; and the Government's current review on its autism strategy has included PDA. There is also a website developed by the PDA society which gives details of resources developed for this group ([www.pdasociety.org.uk](http://www.pdasociety.org.uk)).

## Approaches to teaching children and young people on the autism spectrum

In the context of meeting the needs of autistic individuals, there are many approaches. These often employ a mix of behavioural, developmental and educational approaches, with the goal of enhancing cognitive, communication and social skills whilst minimising behaviours that challenge<sup>(26)</sup>. These approaches have been categorised in different ways in the research literature<sup>(27,28)</sup>. *Comprehensive Treatment Models* are those that focus on many areas of development and on improving functioning across multiple areas of cognitive and emotional development. Examples include Early Intensive Behaviour Intervention<sup>(29)</sup>, or



Social Communication Emotional Regulation Transactional Support (SCERTS)<sup>(30)</sup> but there are many more approaches. Developmental and educational programmes include, but are not limited to, Daily Life Therapy<sup>(31)</sup>, the Denver Model<sup>(32)</sup>, Floortime<sup>(33)</sup>, Son-Rise<sup>(34)</sup> and TEACCH<sup>(35)</sup>. Some approaches cover fewer areas of functioning and behaviour, such as peer training and social understanding. Focused approaches, on the other hand, target very specific skills. These include communication, such as the Picture Exchange Communication System (PECS)<sup>(36)</sup> and those that target early interaction between parents and children, such as Early Bird and PACT (Preschool Autism Communication Trial), amongst others<sup>(37,38)</sup>.

There is good evidence that approaches which focus on communication and joint social interaction can have a significant and positive impact on broader functioning for CYP on the autism spectrum<sup>(39)</sup>. Research focusing on teaching these early communicative behaviours suggests these could offer potential for the later development of social and communication skills<sup>(40)</sup>. Learning through interacting with peers is also critical because CYP on the autism spectrum often interact differently with their peers due to differences in their social understanding<sup>(4)</sup>. What is clear from the literature is that autistic children and young people have specific needs as a result of their autism, and they therefore need distinctive teaching strategies and approaches to meet their needs.

## Evidence informed practice

Given the rapid expansion of research on autism in recent years, the sheer range and extent of approaches can be very confusing for providers, caregivers and practitioners. Caregivers and schools are understandably very motivated to understand which approaches might work and for whom. Meanwhile, proponents of particular approaches often make strong claims for good outcomes, and commercial interests can come into play with companies promoting their own product. This can in turn create a demand for certain approaches. It can also leave caregivers and practitioners vulnerable to trying out methods that have no evidence base or are not suited to the specific CYP.

Evidence Based Practice refers to the integration of the best available evidence with clinical or professional experience<sup>(41)</sup>. Whilst it is important to be guided by the objective consideration of the research evidence, the notion of Evidence Based Practice<sup>(44)</sup> is complex in the field of autism<sup>(42)</sup>. For a start, every autistic person is unique and autistic CYP are likely to have very different strengths and challenges from one another<sup>(7)</sup>. Reviews of the research have drawn the conclusion that many studies are not of high enough quality to draw robust conclusions<sup>(43)</sup>. Approaches are often categorised in different ways in the research literature and they are rarely implemented in the way they are designed<sup>(27)</sup>. Studies focus on different time periods and measure different outcomes<sup>(27)</sup>. In addition, they do not tend to take into account the school context<sup>(44,4)</sup>. Families are also different in their aspirations, goals and personal qualities, so there is a need for much more research into family, child and other factors that might influence outcomes<sup>(39)</sup>.

Overviews of the research evidence have drawn the conclusion that there is no evidence to suggest that any particular approach is superior to any other for all CYP on the autism spectrum, or that a single approach will meet the needs of all learners<sup>(4)</sup>. Research reviews have shown that there is insufficient evidence to make strong claims about specific programmes, as there are many variables that can influence outcomes<sup>(4,5)</sup>. Expert views therefore indicate that a range of approaches is needed in order to suit and address individual needs and preferences<sup>(4,5)</sup>.



Research findings can nevertheless provide robust information that can be of general value in educating CYP on the autism spectrum. Overviews of research indicate that when educating autistic CYP, there is a need to support the development of functional communication and spoken language, social understanding, emotional understanding and regulation, and attention, peer interaction and relationships<sup>(34)</sup>. Research studies have also concluded that a structured and organised environment with visual cues can enable access to the learning environment, and that it is crucial to take into account sensory processing difficulties as well as the social demands of working with other CYP<sup>(26)</sup>. A variety of cues and support should be used to help children with autism understand and navigate the learning environment<sup>(26)</sup>.

In the UK, Guideline 170 produced by the National Institute for Health and Care Excellence<sup>(47)</sup>, for example, highlights that some general conclusions emerging from research are that it is important to make adjustments to the social and physical environment, to support families, and to focus on the development of life skills<sup>(46,47)</sup>. These guidelines pinpoint that approaches need to be developmentally appropriate, that it is crucial to enhance the understanding of caregivers, teachers and peers, as well as their sensitivity and responsiveness to the child or young person's patterns of communication and interaction, and to anticipate and prevent behaviours that challenge. Enabling environments, augmented communication, person and family-centred work, as well as collaboration and multidisciplinary work have all been identified as important. Given that autistic CYP can be very different from one another, effective interventions need to be tailored to meet the unique characteristics of each person and decisions on what approach to use and the intensity of this need to be linked to the assessed needs of the CYP<sup>(4)</sup>.

As research findings cannot give us definitive answers about how to support a CYP at home or in education, it is more helpful to use the term *evidence informed practice* rather than *evidence based practice* as this considers both research and informed practice to be part of the evidence base<sup>(48)</sup>. When selecting approaches, practitioners and caregivers therefore need to consider both the research evidence as well as other factors, such as the individual needs and experiences of the CYP, parental input, professional judgement and assessment, and the experience, capacity and training requirements of teaching staff and schools<sup>(42)</sup>. There is also a need to regularly review educational practices, as these will not always deliver the appropriate response and might sometimes cause distress to the CYP and the family. Staff need to carefully observe and monitor the response of the autistic CYP to what is offered.

Last, but certainly not least, autistic CYP have traditionally been excluded from setting the agenda of working out what is important to focus on and this has led to a large mismatch between what individuals with autism say they need in terms of what constitutes positive outcomes, and what research tends to focus on<sup>(49)</sup>. This highlights the importance of understanding the world from the perspective of autistic CYP and to adopt an autism lens, that is, aim to understand how the CYP sees and responds to the situation<sup>(50)</sup>. It also highlights the need to move away from a narrow focus on how a person with autism behaves, to understanding autism from within. As the late Donna Williams, who was herself autistic, said:

*“...right from the start, from the time someone came up with the word ‘autism’, the condition has been judged from the outside, by its appearances, and not from the inside according to how it is experienced”<sup>(51)</sup>.*

In summary, the range of sources when developing good autism practice needs to include the perspectives of autistic pupils and their families, practitioner experience, research, school data, and the views of stakeholders. Practice should clearly be informed by research evidence, where possible, as well as by statutory guidance.



## Current priorities that have emerged from this report

This report identifies key issues and challenges that autistic CYP, their families and staff currently face in education. These topics are covered in more detail within the eight principles. In summary, these key priorities include the need for educators to find ways to:

- Reduce exclusions from schools
- Address mental health and well-being
- Increase awareness of gender differences and cultural and linguistic diversity
- Promote social and emotional development and reduce bullying.

## Why is it important to reduce rates of exclusions?

The exclusion of children on the autism spectrum in schools in England is of particular concern. Every region in England has had an increase in the number of school exclusions for CYP on the autism spectrum of between 45% and 100% in the last five years<sup>(55)</sup>. The AET has produced a number of booklets on different aspects of exclusion which can be downloaded from the AET website.

## Why focus on mental health?

From a young age through to later adult life, autistic individuals are more likely to have a mental health condition and experience poorer mental health than the general population. In a UK questionnaire to which 1500 people responded, for example, the highest priority for autistic people, parents and practitioners was that they wanted to know how to improve mental health in people with autism. Understanding how to reduce anxiety was also a high priority<sup>(56)</sup>.

## Why do we need to understand more about how gender affects children and young people on the autism spectrum?

Autism used to be viewed as a largely male condition with ratios of between four and ten males to one female. However, many more girls and women are now being identified and diagnosed and recent studies suggest the ratio may be as low as two males to one female<sup>(52)</sup>.

There are a number of areas in which differences seem to exist between the experience and presentation of women and men with autism. At the current time, these are suggested differences but more research is needed to establish what these are. There are now books and papers published which focus on girls and women on the autism spectrum, many of these being accounts written by autistic women and girls. Several authors have contributed to an edited book published in 2019 entitled *Girls and Autism*<sup>(53)</sup>.

## What are the issues facing cultural and linguistically diverse autistic children and young people and their families?

All cultures, races, ethnicities and genders are represented within the population of those diagnosed with autism. Research on the needs of culturally and linguistically diverse pupils with autism and their families has found that minority populations are under-represented





in research studies, and there is little understanding of how different cultures and beliefs influence the educational needs of autistic pupils from diverse backgrounds. Culturally and linguistically diverse families also find it difficult to access the information, help and resources they need and to navigate the education system.

## Why is there a need to focus on friendships, peer relationships and bullying?

Autistic CYP experience a higher frequency of bullying than non-autistic peers. This indicates the need for education staff to receive training on how to reduce bullying whilst facilitating quality and lasting peer relationships. Friendships and peer relationships are ways to promote social and emotional understanding and development.

## Perspectives from the AET Young People's Panel

The Autism Education Trust Young People's panel offered their perspectives on what they deemed to be good practice in autism education. They were asked to comment on the environment, the staff and the peer group.

The panel highlighted the importance of staff understanding autism and sensory issues, the importance of pastoral staff and adjustments to the curriculum. The first point made was that staff should have training and understand autism, including how to understand and manage meltdowns, shutdowns and behaviours that challenge. The panel also highlighted that sensory issues need to be taken into account when planning lessons, as work with textiles, food, and design and technology can pose problems with different smells and textures. The panel would like pastoral staff available all of the time. Having a counsellor or someone that knew them well was incredibly helpful. They would also like to choose which member of staff was their mentor.

In terms of the peer group, the panel addressed the issue of relating to other CYP with autism. Some on the panel felt they had been pressured to help other autistic students or to run groups. Although this might work for some autistic students, some felt overwhelmed and emotionally drained by the experience. The panel also said that support groups or classes that only had autistic students within them could be problematic. These may trigger behaviours in each other and the needs of each student may be very different. The panel said that it is hard to know what to do at lunch and break-times if they did not have a friendship group. Being given the opportunity to share their diagnosis with their peers can be helpful in enhancing their understanding.

In relation to the environment, they highlighted the importance of safe spaces, classrooms, queuing and transitions. The panel felt it was important to have more than one breakout room, and that having just one space defeated the object of the space. They suggested that beanbags and toys should be available within the area. In the playground area too there should be quiet places to go, away from the noise. Classrooms should be large, where possible, and fluorescent strip lighting should be taken out. Rooms are often cluttered with displays and the panel felt that displays should be limited to communal areas. High stools can be dangerous and some had often fallen off high stools when they had rocked. Queuing with other people was an issue, particularly in the canteen as it was hard to cope with the noise and the smells that can be overwhelming for some autistic students. Transition to secondary school needs to be supported and opportunities for meeting new staff should be given. The panel recommended that all autistic students are given a map of the school



before they start. This should be colour coded according to subjects. Fire alarms and end of lesson bells should be demonstrated and have different sounds. In one school, bells were not used for the end of lessons. The staff merely kept the time on their watch.

Supporting students to access the curriculum should be given more priority than the exam grades they achieved. The panel also wanted praise for low marks or grades as it can be very disheartening to students when they do less well. They would like more extra-curricular activities to “escape from exams and homework”. The panel also wanted better careers advice that was specific to autism.

## The Ofsted inspection framework

Ofsted has recently revised its frameworks for Early Years, Schools and Post-16 settings and these have been implemented from September 2019. We summarise key points that are of relevance to the development of good autism practice. The full inspection frameworks can be found on the government website ([www.gov.uk](http://www.gov.uk)). The *Education Inspection Framework* sets out how Ofsted inspects maintained schools, academies, non-association independent schools, Further Education (FE) and Skills provision and registered Early Years settings in England. The quality of education is a key judgement area for Ofsted. Across all settings, inspectors will consider how well leaders and teachers promote high expectations for achievement and progress through the systems they use to monitor and develop the quality of provision for learners, including those with Special Educational Needs and Disabilities (SEND).

Leaders are to ensure that all learners, including those with SEND get the information, advice, guidance and support to achieve their next steps and progress to positive destinations. Leaders are to provide the support for staff to make this possible. When assessing leadership and management, inspectors must consider the school’s use of performance management and the effectiveness of strategies for improving teaching. This should include the extent to which professional development is based on the identified needs of staff and the induction needs of newly qualified teachers and teachers at an early stage of their career.

When assessing the level of behaviour and safety in schools, inspections will look at a small sample of case studies to evaluate the experience of particular individuals and groups, including disabled pupils and those who have SEND. For Post-16 settings, Ofsted inspections focus on the extent to which “*learners with SEND/high needs have greater independence in making decisions about their lives.*” Across the settings, reference is made to the need to measure outcomes and to show evidence that there are high expectations of CYP with SEND and that they are achieving well and prepared for the next stage of their education or adult life.

## Early Years Ofsted inspections

For Early Years, there is an *Early Years Inspection Handbook* for Ofsted registered Early Years provision. The inspector should discuss with the provider what they intend the relevant children to learn and remember based on what those children know and can already do. The evidence collected must include “*the quality of support for any child with SEND*” and “*the extent to which the curriculum and care practices that the setting provides meet the needs of the range of children who attend, particularly children with SEND*”. A ‘good’ provider will “*have the same ambitions for almost all children. For children with particular needs, such as those with high levels of SEND, their curriculum is still ambitious and meets their needs*”.



## School Ofsted inspections

For schools and settings registered with Ofsted for CYP aged from 5 to 16, the *School Inspection Handbook* makes the following points. Before making the final judgement on overall effectiveness, inspectors will always consider the spiritual, moral, social and cultural development of pupils at the school, and evaluate the extent to which the school's education provision meets different pupils' needs, including pupils with SEND. As part of their inspection, inspectors will look at the experience of a small sample of pupils and consider the way the school is working with the multi-agency group to ensure that the child receives the support they need. For pupils with SEND, this will include ensuring that appropriate reasonable adjustments are made in accordance with the Equality Act (2010) and the SEND Code of Practice (2014).

## Further Education and Skills Ofsted inspections

This states that the quality of provision for learners with high needs and SEND will always be considered during the inspection of any type of provision. *“The inspector should have clear data on the current number of learners with SEND and the number of learners for whom high-needs funding is received, and their particular needs”*. Before making the final judgement on overall effectiveness, inspectors must evaluate the extent to which the education and training provided meets the needs of all learners. This includes learners with SEND and those who have high needs.

## Principles of Good Autism Practice

The guidelines in this report outline eight key principles that provide a framework for the development of good quality education for all autistic CYP and their families. They aim to support practitioners to meet the specific learning needs of autistic CYP, as well as provide pointers to teaching approaches, methods and resources to use in educational provision and practice.

The underpinning ethos and values behind the principles focus on the need for mutual adaptation on behalf of the person with autism and those who live or work with that person<sup>(9)</sup>. This means encouraging settings and practitioners to reflect on the dynamic relationship between the CYP and those around them, understanding the way the person processes and experiences the world and on finding ways to empower and give the autistic CYP control over their learning. This takes account of the fact that there are several ways of approaching the development and delivery of good autism practice, and more than one solution or approach to an intended outcome. The process of achieving an outcome is also crucial as the nature of the approach chosen and how this is delivered should be sensitive to the wishes and needs of the individual CYP concerned and their family. It should also be within the skill set of those who work with the CYP. The latter might seem obvious but as time and money for training is often restricted, some practitioners engage in approaches without adequate knowledge of autism or the approach, and so this might not be implemented as intended and be less effective or counterproductive.

These guidelines present eight principles that have emerged from research evidence, practice and policy, and the perspectives and insights of autistic children and adults. The principles represent the ethos, value and practice that needs to underpin inclusive education for all Children and Young People (CYP) whilst outlining the distinctive approaches and methods that are needed for implementing good autism practice in education across Early



Years settings, Schools (5 to 16) and Post16 provision. The eight key principles are presented within the four themes that inform the Autism Education Trust Continuous Professional Development Programme (the AET programme), which are:

- Understanding the individual
- Positive relationships
- Learning and development
- Enabling environments.

Although the principles are presented in numerical order, they do not indicate an order of importance and they interrelate with each other. Taken together, they highlight key elements of good autism practice (see *Figure One*). The eight principles are as follows:

1. Understanding the strengths, interests and challenges of the autistic child and young person
2. Enabling the voice of the autistic child and young person to contribute to and influence decisions
3. Collaboration with parents and carers of autistic children and young people
4. Workforce development to support autistic children and young people on the autism spectrum
5. Leadership and management that promotes and embeds good autism practice
6. An ethos and environment that fosters social inclusion for children and young people on the autism spectrum
7. Targeted support and measuring progress of children and young people on the autism spectrum
8. Adapting the curriculum, teaching and learning to promote well-being and success for autistic children and young people.



Figure One: Four themes and eight principles



For each of the principles outlined, this report:

- Articulates why each of these principles are important
- Summarises the underpinning research evidence
- Situates the principles within the policy context
- Gives guidance on implementation in practice
- Provides links to the SEND Code of Practice and Teacher Standards
- Gives links to the AET autism standards for each age phase
- Makes links to some of the case studies that provide examples of good practice.



## Principle One: Understanding the strengths, interests and challenges of the autistic child and young person

### Key points

- Key areas of difference in autism influence the way in which CYP learn and experience educational settings. Autism is a spectrum condition leading to wide variation within the autistic population. Staff need to get to know the specific individual and how autism affects them.
- CYP with autism have an uneven profile of abilities (e.g. may be more or less advanced in different areas of academic, social and emotional functioning, which may affect the development of independence and life skills).
- Other conditions often co-occur with autism and knowledge of these conditions should influence educational planning. Practitioners need to take into account potential disturbed and erratic eating and drinking, sleeping and personal care routines.
- Autistic CYP are likely to experience high levels of anxiety and stress and this will impact on their well-being and mental health, their learning and on their levels of interaction and communication.
- Autistic CYP have strengths and interests that need to be recognised and built upon within their educational programmes.
- Differences in the presentation and impact of autism on girls should be considered as should the cultural and linguistic background of CYP on the autism spectrum.
- The needs and abilities of an individual CYP will change over time and across settings so regular reviews of these is required with appropriate action taken.

### Why is this principle important?

Like all children and young people, individuals on the autism spectrum will vary in terms of their intellectual ability, their personality, their profile of strengths and needs, the presence of other conditions (e.g. learning disability, ADHD, epilepsy) and their life experiences. In addition, differences between males and females on the autism spectrum have been increasingly recognised in autism education research and practice<sup>(1)</sup>. A consistent feature is that all autistic CYP are likely to experience increased levels of anxiety and stress compared to their peers and this will impact on their learning, participation and well-being.

However, only focusing on labels and diagnoses can lead to assumptions and stereotyping. Staff might expect certain differences and difficulties, without getting to know the individual, and their strengths and interests. This can include assuming that verbal CYP on the autism spectrum have a similar ability across all areas of development, or that less verbal and preverbal children are lacking in strengths, ability or potential. Respect and recognition of difference and diversity require settings to identify and celebrate these differences rather than trying to 'fix' or 'normalise' the autistic CYP<sup>(2)</sup>. Many different ways of being human should be accepted to take account of people's different physical, sensory and psychological profiles and skills. One does not expect a child who needs a wheelchair to walk, yet we often demand the equivalent of autistic CYP.



## Literature and research evidence that supports Principle One

Whilst a diagnosis on the autism spectrum gives a signpost to the needs of CYP, identification of their needs can only arise from understanding how the condition impacts on the individual at a particular time and in a particular learning environment<sup>(3)</sup>. It is therefore crucial for educators to individualise assessments to identify relative strengths and weaknesses to inform educational programming<sup>(4)</sup> and to use assessment tools that measure well-being<sup>(5)</sup>. Practitioners need to ensure pupils on the autism spectrum are effectively engaged in decision-making and in planning for options beyond school<sup>(6)</sup>.

Gender can influence both the expression of autism in individuals and educational needs. Females have been found to have better social and communication skills than boys<sup>(7)</sup> and their social difficulties may be overlooked by the wider social circle that girls typically have<sup>(8)</sup>. Females may show fewer repetitive behaviours, have more 'typical' special interests and can be more passive than males but research into gender differences is still in its infancy<sup>(9)</sup>. Girls tend to be diagnosed later and may have been misdiagnosed with other conditions and so may not receive appropriate **support** in educational settings<sup>(9)</sup>. This can lead to very difficult school experiences and decreased school engagement<sup>(10)</sup>.

The last few years have seen a rise in studies of gender identity and gender self-esteem in autism. Studies have found that autistic people identified less with a gender group and perceived specific gender more negatively compared to non-autistic individuals<sup>(11)</sup>. It is important for practitioners to be aware of the rights of an autistic person who changes how they identify their gender and to assist others in understanding this aspect of their life<sup>(12,13)</sup>.

Cultural and linguistic diversity and minority populations are underrepresented and there are gaps in understanding how different cultures and beliefs influence the unique educational needs of autistic pupils from diverse backgrounds<sup>(14)</sup>. Their families are also likely to find it more difficult to access the information, help and resources they need and to navigate the education system<sup>(15)</sup>.

There is a growing understanding of how poor mental health impacts on an individual's ability to engage with and succeed in daily activities<sup>(16)</sup>. The last five years have seen an increasing awareness of mental health difficulties in children and young people generally, including those with autism<sup>(17)</sup>, and how these persist over time<sup>(18)</sup>. Symptoms have been found to increase during the adolescent period and extend into adult life<sup>(19)</sup>. It is well known from the accounts of autistic adults that many feel very anxious for much of the time<sup>(18,20)</sup>.

In addition, they often have low self-esteem as they receive more critical comments from others than their peers and are often at a loss to know why what they have done is inappropriate or insensitive. So, having high anxiety and low mood underlie many mental health conditions. Reducing anxiety and giving more positive reinforcement to autistic CYP is therefore likely to reduce the mental health problems now and in the future.

What is less explored, however, is the impact of having 'strong interests' which are encouraged by staff and parents and built into curriculum activities. One study found that being able to pursue their interests had a number of benefits for CYP, including improved communication, greater independence and better motor skills<sup>(21)</sup>. Andy McDonnell and Damian Milton, an autistic academic, write about the state of *positive flow* that ensues when engaged in activities that one enjoys and loves and how essential this is to all humans and particularly to those who have challenges in life<sup>(22)</sup>.



## Implications for practice

Good Autism Practice requires an understanding and awareness of how the main areas of difference<sup>(23,24,25)</sup> impact on the learning, participation, independence and emotional state of autistic CYP. This includes an understanding of how autism may present differently in girls and the impact of cultural and linguistic diversity for CYP on the autism spectrum.

Settings need systems in place to identify the individual strengths, interests and challenges of individual CYP as a starting point to understanding and meeting their needs. Information can be gathered through observations and/or communication with the individual, discussions with their caregivers and other professionals who have worked with them or from reports and supporting documents, such as the AET Schools' Progression Framework<sup>(26)</sup>.

In addition, staff should prioritise the strengths and interests of CYP on the autism spectrum to support their engagement, learning and motivation<sup>(27)</sup>. Key information should be regularly updated and shared through appropriate means, such as pupil profiles or passports, with strategies identified to promote inclusion and progress. A flexible educational approach should be adopted, based on an understanding of the individual requirements of CYP on the autism spectrum within their setting. Adjusting the timetable, where the CYP sits in class, how and when they do their homework, and facilitating their inclusion with peers in a way that respects their preferences, as well as reducing social demands, are some of the ways in which CYP can be helped to feel comfortable in an educational setting<sup>(28)</sup>. Consideration must be given to the impact of the sensory environment and the identification of ways to reduce and manage this. This might include conducting an audit of the sensory environment and providing designated and quiet spaces within a setting.

## SEND Code of Practice recommends

*“A detailed assessment of need should ensure that the full range of an individual’s needs is identified, not simply the primary need. The support provided to an individual should always be based on a full understanding of their particular strengths and needs and seek to address them all” (p.96).*

## Links to the Teacher Standards

Teachers must have a clear understanding of the needs of all pupils, including those with Special Educational Needs and Disabilities. They need to demonstrate an awareness of the physical, social and intellectual development of children, and know how to adapt teaching to support pupils' education at different stages of development.





## Links to the AET Standards

### Early Years

Section One, Unique child, Standards 1 to 4

### Schools 5 to 16

Section One, The individual pupil, Standards 1 and 3

### Post-16

Section One, The individual, Standards 1, 2 and 3

## Links to the Case Studies report

**Case Study A:** This is set in a mainstream primary school and gives details of the work that staff did with advice from the Autism Advisory teacher to ascertain the strengths and challenges of an eight-year-old autistic boy. Details are then provided as to how the staff adjusted the environment to address his needs and how they built his interests and strengths into the curriculum.

**Case study E:** This is a secondary mainstream school for pupils aged 11–16. Within the case study is an interview with a Year 9 pupil who describes his positive experiences at the school.

**Case study H:** This is a mainstream primary school for children aged 3–11 years which has a unit for 10 children with moderate learning difficulties. The work done to enable a four-year-old autistic child to adjust to and succeed within the school is described. Ascertaining the child's profile of strengths and needs was paramount to the success achieved.



## Principle Two: Enabling the voice of the autistic child and young person to contribute to and influence decisions

### Key points

- Include and consult the CYP in decisions about their education (e.g. day to day activities and tasks, social preferences, review meetings and transition planning).
- Regularly discuss current and future needs and wishes with the CYP (e.g. by arranging times to discuss the support they receive and what might help; and reviewing their pupil passport or profile.)
- Identify the most appropriate and developmentally relevant means for CYP to communicate their views. This may involve the use of alternative and augmentative forms of communication.
- Work with the CYP to develop their understanding of the way autism affects them, when parents and the young person consent to this (e.g. individual or group work with other autistic CYP).

### Why is this principle important?

The participation of all CYP in decision-making has been an important issue in education since 1989 when the United Nations Convention on the Rights of the Child (UNCRC) established the right of all children to express their views, and to have these views listened to and taken seriously when decisions are being made that affect them<sup>(1)</sup>. The Convention also recognised that children who are disabled should be taught at school in a way that understands their disability and works towards achieving their the fullest possible social inclusion and individual development (Article 23)<sup>(1)</sup>. These rights have been embedded into legislation and policy initiatives in England since the ratification of the UNCRC by the UK in 1991, with the SEND code of Practice<sup>(2)</sup> highlighting the need for full participation of CYP with SEND in decisions that affect their lives. Involving CYP in decisions can benefit their emotional health and well-being. It can enable them to feel in control of their lives, to develop their decision-making skills and can make them feel a valued part of their educational setting and the wider community<sup>(3)</sup>.

Differences in the communication and social interactions of autistic CYP, and the response to this from the staff, can be a barrier to their active participation in choice and in making decisions. They may be overlooked or not actively engaged in decisions<sup>(4)</sup>. Providing opportunities for CYP to have their voice heard and to express their thoughts, feeling and ideas, may require modified or creative methods. However, this is essential for helping individuals gain belief in their own capabilities and develop the knowledge and skills needed to make healthy choices and develop their independence.

### Literature and research evidence that supports Principle Two

There has been a growing recognition in the research field that the voice of autistic individuals is vitally important in terms of the successful design and delivery of educational approaches and curriculum<sup>(5,6,7)</sup>. This has also been highlighted in the need for education research to deliver real partnerships, including the autistic voice, to design quality research that is relevant to autistic CYP<sup>(8,9,10)</sup>. Autistic inclusion in the research process can enrich it by:

*“increasing the epistemological integrity of studies that seek to explore important questions relating to the wellbeing of autistic people” (p.63)<sup>(11)</sup>.*



It can also lead to new insights on difficulties that autistic and non-autistic people have in understanding each other's worlds, as captured in the idea of a “*double empathy problem*”<sup>(12)</sup>. The importance of conducting research on autistic experience without neurotypical preconceptions was illustrated in a consultation of 16 autistic UK Higher Education (HE) students about their experiences of success<sup>(13)</sup>. Participants became co-analysts of their data and provided counter-narratives to deficit-based interpretations of autism, giving accounts of making themselves ‘extra-visible’ as autistic students to assert their rights. The autism diagnosis was perceived both as an aid to self-understanding and a cause of additional barriers. In raising awareness of their own needs, participants contributed to broader understandings of autism within their academic communities, inadvertently becoming educators and role models. The research highlighted the extra effort required by autistic students to thrive within Higher Education and the barriers imposed by current requirements to both pursue formal diagnosis, and to disclose it in order to receive adjustments. Completing a form entitled Disabled Students Allowance for students of well above average intellectual ability is distressing for some autistic students and may mean they do not complete it.

A review of 17 qualitative studies reported on the experiences of autistic CYP in school and in particular how this related to their sense of feeling different or isolated from their non-autistic peers<sup>(14)</sup>. The authors concluded that autistic pupils perceived differences related to their autism, the quality of interpersonal relationships and the accessibility of the school environment. These were all important factors in making them feel different. The review also identified that the feelings of being ‘different’ can be improved by listening to their voice and making them feel more included, thus reducing the risk of social isolation which may cause mental health difficulties.

Despite the growing evidence of the importance and value of the autistic voice in research and educational practice, there is still a need to improve how to meaningfully consult autistic CYP around lesson planning, producing individual passports and finding out what they want to achieve in terms of outcomes from education<sup>(15)</sup>.

## Implications for practice

Good autism practice promotes a partnership approach to decision-making based on building positive relationships between staff and autistic CYP<sup>(16)</sup>. There should be flexibility in the curriculum to give CYP regular opportunities to be involved in giving feedback on their experience and in decision-making, and the skills needed to do so. The most appropriate and developmentally relevant means have to be identified and used to enable them to communicate their views. For some CYP, this will involve the use of alternative and augmentative forms of communication whilst others may be able to discuss issues directly with the staff who work with them<sup>(17)</sup>. This could include using a photo-voice approach where CYP take photographs of the places where they felt listened to and the people who they felt listened to them<sup>(18)</sup>, or the Ideal School template that scaffolds conversations about what CYP think of school and staff and how these might be enhanced for them<sup>(19)</sup>.

Educational approaches need to consider the preferences of CYP on how they can best be supported in their day-to-day activities. Staff should proactively listen to the voice of CYP across the range of activities in which they engage, not only at points of transition or review meetings. This should include the nature and level of one-to-one adult support; the use of technology for academic and learning needs; planning, organisation and time management; their understanding of autism; and the social aspects of their education (e.g. working as part of a group and peer relationships; understanding and managing their emotional state and the need for time alone; managing sensory needs; and times of transition or change).



## SEND Code of Practice recommends

*“Children have a right to receive and impart information, to express an opinion and to have that opinion taken into account in any matters affecting them from the early years onwards. Their views should be given due weight according to their age, maturity and capability”.* (Articles 12 and 13 of the United Nations Convention on the Rights of the Child) (p.20).

## Links to the Teacher Standards

As part of their responsibility to promote good progress and outcomes, all teachers should guide pupils to reflect on the progress they have made and their emerging needs.

## Links to the AET Standards

### Early Years

Section Two, Positive relationships, Standard 3

### Schools 5 to 16

Section One, The individual pupil, Standards 7 and 10 Section Three, Learning and development, Standard 9 Section Four, Enabling environments, Standard 2

### Post-16

Section One, The Individual, Standard 10 Section Two, Building relationships, Standard 9

Section Three, Curriculum and learning, Standards 7 and 8 Section Four, Enabling participation, Standard 10

## Links to the Case Studies report

**Case study F:** This is a community special school for pupils aged 3–19 years. Pupil voice is promoted across the school. Staff use Talking Mats ([www.talkingmats.com](http://www.talkingmats.com)), MAPS (Making Action Plans) and ideas based on the ideal self technique. Every pupil has a PowerPoint presentation that they help to produce for their Annual Review.

**Case study G:** This is a specialist, all age academy for students on the autism spectrum aged 5–19 years. Staff are currently piloting a research-based three-pronged approach to capturing the autistic voice. This includes a visual bulletin board where students post a message on one of three topic boards, creating their own scrapbook of poems, pictures, and diary entries and the use of a secret box where students can post anonymously.



## Principle Three: Collaboration with parents and carers of autistic children and young people

### Key points

- Proactively engage with parents and carers of CYP to establish and develop ways to communicate and share information, ideas and progress.
- Signpost parents and carers to appropriate services and support and, if they are seeking diagnostic assessment, inform them about the referral pathway in their local area through the Local Offer.
- Understand the needs of parents and caregivers who themselves may have autism, as well as families from a diversity of cultural and religious backgrounds.
- Coordinate and disseminate important information from all key stakeholders (including parents/carers and other family members) and ensure this information is shared with all, including the CYP.

### Why is this principle important?

Parents, carers and families play a key role in influencing children and young people's progress in learning, independence, emotional health and well-being<sup>(1)</sup>. Parents and carers have lived through their successes and failures and can provide extremely useful information on their child's preferences and needs and how best to address specific issues. Staff know the challenges that the setting might pose and together parents and staff can discuss how to mitigate these. A positive partnership, mutual respect and good communication will lead to effective support. Caregivers can also provide information about co-existing conditions, the young person's awareness of their diagnosis and what it means to them, and factors likely to cause anxiety or stress. Sharing ideas, strategies and information is critical in helping the CYP to prepare for transitions and changes, support for wider curriculum events and trips, homework arrangements, developing independence skills and preparing for adult life. There may be significant differences between the home and the setting in the way an autistic CYP communicates, interacts and expresses their emotional state as the demands made are often very different. Being aware of these differences and acknowledging these are important for both parents and staff and the well-being of the CYP.

The response of parents and carers to having an autistic child varies from family to family and at different times and stages of their child's life<sup>(2)</sup>. Cultural factors can influence the extent to which a diagnosis of autism is sought or recognised by parents or carers<sup>(3)</sup>. In addition, some caregivers may have autism or other communication needs themselves. They may find it more difficult to process information and to express their views. Higher levels of parental stress are more likely for parents and carers of autistic CYP and this can negatively affect their own well-being and ability to engage and communicate with staff<sup>(4)</sup>. Stigma, the negative social reactions and beliefs of others regarding their child or their parenting, can increase stress and social isolation<sup>(5)</sup> and families may isolate themselves to avoid difficult or embarrassing situations<sup>(6)</sup>. Parents and caregivers of autistic CYP are more likely to work fewer hours and earn less than other parents<sup>(7)</sup> and this can impact parental well-being and relationships. In addition, issues with their child's sleep<sup>(8)</sup> and diet<sup>(9)</sup> can affect family life, as can actions that may challenge<sup>(10)</sup>, understanding and accepting their child's diagnosis<sup>(11)</sup> and financial burdens.



## Literature and research evidence that supports Principle Three

Among non-autistic CYP it has been shown that parental and carer involvement helps to strengthen academic and social inclusion, but there remains little evidence of the best way to effect this in education. A US study found that parents of autistic children were more likely to be actively involved with their children's education compared to parents of non-autistic children<sup>(12)</sup>. Parents reported that communication with school staff was generally poor and their levels of satisfaction increased with the amount of involvement they had with the school<sup>(12)</sup>. Parental confidence is associated with teachers' knowledge, their ability to manage behaviours of concern and the quality of their communication and collaboration<sup>(13)</sup>. Indeed, recent research suggests that parents and teachers may be more aligned than was previously thought in terms of their priorities for education<sup>(14)</sup>.

Parent training programmes have not tended to provide guidance on how to work with professionals, but a recent US study that used a parent-advocacy training programme reported that an increase in parents' sense of efficacy in relation to parenting enhanced the families' access to services<sup>(15)</sup>. Despite the fact that autistic adults are increasingly having children, and parents of autistic children are receiving a later diagnosis themselves, there remains little research to compare the experience of autistic parents with non-autistic parents – something that should be a future priority for research.

However, a growing area of research has been to explore how culturally and linguistically diverse populations access education. Research has consistently shown across countries that rates of autism are higher in some immigrant populations<sup>(16,17)</sup>, and that immigrant families may be more likely to have an autistic child with a learning disability<sup>(17)</sup>. A UK study of parents of autistic children from Somalia found that cultural attitudes, the presence of behaviours of concern and language differences were factors that influenced their understanding and acceptance of their child's difficulties<sup>(18)</sup>. Studies have reported on the negative impact of stigma on parental perceptions, as well as their scepticism around services and how confusing these can be to access<sup>(18,19)</sup>. Some cultures do not have an equivalent word for autism and information is rarely translated. When it is, the translation may alter the meaning.

## Implications for practice

Good autism practice means that staff should actively seek ways of engaging with parents and carers of all autistic CYP to share concerns, ideas and strategies. A partnership approach should be established through planned opportunities for informal communication and more formal review meetings. Settings should consider whether staff need to adapt the way they communicate with individual parents and carers to enable them to fully participate and engage in their child's education (e.g. always providing written confirmation of any actions agreed verbally). Parents and carers should be asked what the priorities are for their child and agree effective ways in which to communicate and to whom. The AET developed a parent and carers guide designed specifically for this purpose – *Working together with your child's school*<sup>(20)</sup>. This recognises that parent and carer's concerns are often as much about their child being safe, secure, accepted, respected, valued and nurtured as they are about curriculum issues.

Staff must be mindful of the impact of stress on parents and carers and establish a positive approach to autism and the individual CYP they support. This is especially important at points of transition between year groups or educational settings<sup>(21)</sup>. For example, providing timely support and information to parents and carers on possible Post-16 options and Post-



18 education and training can help to reduce some of their anxiety around transition into adulthood for their child<sup>(22)</sup>. Settings can also provide a forum where parents and carers can meet together to share information (e.g. through training events or signposting parents to parent groups and other services via their local offer). Creating a wider network of support and help has been shown to be beneficial for addressing parental stress and isolation for families<sup>(11)</sup>. This can be particularly helpful for parents or carers of newly diagnosed CYP<sup>(23)</sup>.

## SEND Code of Practice recommends

*“Local authorities, Early Years providers and schools should enable parents to share their knowledge about the child and give them confidence that their views and contributions are valued and will be acted upon. At times, parents, teachers and others may have differing expectations of how a child’s needs are best met. Sometimes these discussions can be challenging but it is in the child’s best interests for a positive dialogue between parents, teachers and others to be maintained, to work through points of difference and establish what action is to be taken” (p.21).*

## Links to the Teacher Standards

A key expectation is that teachers should work with parents in the best interests of their pupils.

## Links to the AET Standards

### Early Years

Section Two, Positive relationships Standards 1 and 4

### Schools 5 to 16

Section Two, Building relationships, Standards 2 and 8

### Post-16

Section Two, Building relationships, Standards 1 and 9

## Links to the Case Studies report

**Case study D:** This is a primary special school for autistic children aged 3–11. The school demonstrates a commitment to parental involvement through an extensive training programme. They run 40 workshops a year for parents. The school’s Family Support Worker, Middle and Senior leaders and Speech and Language Therapists and the Occupational Therapist run these. They focus on topics that particularly link to life at home and they share strategies used at home and school.

**Case study E:** This is a secondary mainstream school for pupils aged 11–16. Within the case study is an interview with the mother of a Year 9 pupil who describes the school as a “beacon of excellence”.

**Case study F:** This is a community special school for pupils aged 3–19 years. The school won an award from the National Association for Special Educational Needs (NASEN) for its creative ways of working with parents, being nominated by the parents themselves.



**Case study H:** This is a mainstream primary school for children aged 3–11 years which has a unit for 10 children with moderate learning difficulties. It describes the very gradual inclusion of a four-year-old child into the nursery. The close involvement and collaboration with his mother was an essential element to their success.





## Principle Four: Workforce development to support children and young people on the autism spectrum

### Key points

- All staff new to the workforce (including non-teaching staff and governors) receive autism training as part of their induction (e.g. new staff attend AET Making Sense of Autism training in their first year).
- Every setting has access to an autism champion/lead practitioner who coordinates support and information between CYP, staff, parents and other services.
- Settings regularly audit staff confidence levels, understanding and knowledge of autism and link this to Continuing Professional Development (CPD) and the Performance Management system (e.g. settings use the AET autism competency framework to audit staff skills and identify areas for staff development).
- Leadership and management have a commitment to an ongoing programme of CPD in autism to update the knowledge, skills and practice of their workforce.

### Why is this principle important?

The quality of teaching is the single most important driver for ensuring positive outcomes for all children and young people, including those with SEND<sup>(1)</sup>. The attainment, achievement and well-being of autistic CYP should be a focus for all staff given their increased risk of bullying<sup>(2)</sup>, exclusion<sup>(3)</sup>, and poor academic results<sup>(4)</sup>. If an individual's strengths, interests and challenges are not identified and acted upon it will negatively impact on their academic progress and well-being, and they are then likely to require a greater level of resource and support in the future. The significant increase in the numbers of children and young people diagnosed on the autism spectrum<sup>(5)</sup> and identified as having special educational needs<sup>(6)</sup> means the educational workforce must be informed and equipped to meet the needs of this group. This can only be achieved through an increased understanding of autism, targeted Continuing Professional Development and creating time for staff to reflect on, discuss and evaluate their practice to create a consensus and consistency of ethos and approach.

Many reports have identified and recommended staff development as being critical in terms of enhancing practice and outcomes for autistic CYP<sup>(7,8,9)</sup>. The recent requirement by the Department for Education to include autism as part of initial teacher training courses in England is a positive step. As knowledge on autism is constantly being developed, there is a need for CPD to regularly update the knowledge, skills and practice of the educational workforce as a whole, and not just for new staff<sup>(10)</sup>. This requires a commitment from leadership and management to developing a well-informed and effective workforce to enhance practice for CYP with SEND and those on the autism spectrum.

### Literature and research evidence that supports Principle Four

A number of studies have suggested that a lack of autism knowledge amongst the teaching staff can negatively impact on the school experiences of autistic children and their opportunities to succeed<sup>(21,22)</sup>. A qualitative study of 12 autistic pupils in secondary school reported that they felt unsupported and misunderstood by teachers, particularly when it came to their social and sensory needs<sup>(22)</sup>. Similarly, an exploration of the mainstream school experiences of three autistic teenage girls highlighted the need to adapt lessons to their particular learning style or to link lessons to their particular areas of interest<sup>(23)</sup>.



A lack of knowledge and training about autism can affect a teacher's relationship with an autistic CYP. When a study<sup>(14)</sup> compared teacher relationships with non-autistic peers to those with children with an intellectual disability, they found that teachers felt less close to the autistic children. This was associated with the child's social difficulties, what the teacher perceived as 'oppositional' behaviour and repetitive or restricted interests. The authors concluded this arose due to a lack of knowledge about autism, which led to teachers misinterpreting actions and responses and not knowing how to relate to autistic children. On the other hand, when schools have made concerted efforts to enhance the understanding and practice of all staff, many CYP on the autism spectrum have been appropriately and successfully supported. One approach where a selected member of staff (an autism lead) was trained and mentored to develop provision for these pupils showed growth in self-confidence and a positive impact on the knowledge of their colleagues<sup>(24)</sup>.

It has been stressed that the effective inclusion of CYP on the autism spectrum in mainstream settings depends on creating a positive ethos<sup>(15)</sup>. This is seen as the cornerstone of good practice, particularly having a focus on training and staff development activities. Parents are viewed as equal and valuable partners and are invited into many aspects of school life. A study encouraged TAs to record three incidents each day that made them smile about an autistic CYP and to reflect on their own actions<sup>(16)</sup>. This was said to lead to positive changes in their perceptions of the children they worked with. Another study<sup>(17)</sup> found that when teachers reflected on their own practice and attitudes, using a social-relational understanding of autism, inclusion was enhanced. Recent research has shown that staff in schools are more confident in teaching autistic CYP and in managing behaviours of concern<sup>(18)</sup>.

The All Party Parliamentary Group on Autism (APPGA) report on Autism and Education in England 2017<sup>(19)</sup> found that 41% of 308 teachers surveyed were confident in supporting a child who had an Education and Health Care Plan (EHCP), but this dropped to 33% where such a plan did not exist. This suggests that there is less detail and knowledge for children who have not had a formal statutory assessment. It is vital that staff are given key information on all autistic CYP and that they consult with children without EHCPs – who are likely to be in the majority – to identify their needs and how these are best addressed.

A survey of UK teachers about their awareness and knowledge of inclusion for CYP on the autism spectrum, showed that improvements had been made over time, perhaps reflecting both the increasing availability of training materials and more opportunities to work with autistic children<sup>(18)</sup>. They found that the confidence to manage behaviours of concern (e.g. rigidity, anxiety) was higher amongst SENCos and Senior Managers than within the general teaching population. A high percentage (80%) of the 53 respondents to the survey said they would attend autism training if this was offered, showing that they recognised the need for this. A consultation with teachers about strategies for creating an effective inclusive environment identified that a number of key recommendations from staff included more resources and training; teaching methods tailored to each child; greater teamwork within the school; building a rapport with the autistic child; and whole-school awareness of disability and acceptance of differences<sup>(20)</sup>.

Significant progress has been made in training a large number of teaching staff in the UK about autism, primarily as a result of disseminating the materials developed by the Autism Education Trust, the National Autistic Society and other organisations<sup>(11)</sup>. Many local authorities have also developed autism outreach and advisory teams who deliver autism training and support staff in educational settings. Positive outcomes from the AET training include that staff feel more confident in their abilities, there is a reduction in the risk of



autistic children being excluded and staff are more able to construct assessments that more accurately reflect the child's strengths and needs<sup>(12)</sup>. A report on five case study schools in which staff had completed the AET Schools Programme training across all three tiers, highlighted that the training had been important in enabling the schools to provide good autism provision<sup>(13)</sup>.

## Implications for practice

Good autism practice means that settings provide access to professional development on several levels to meet the range of needs of autistic CYP and the staff who work with them<sup>(25)</sup>. This requires leadership and management to understand the professional development and resourcing requirements of staff, for instance, using the AET autism standards<sup>(26,27,28)</sup> and the AET autism competency frameworks<sup>(29,30,31)</sup> to identify the CPD needs of all staff. The impact of any professional development on the learning and well-being of autistic CYP and of staff confidence and ability to meet their needs should also be considered, for example, through performance appraisal and management. There should be a focus on developing an understanding of autism and how this might affect the learning of individual autistic CYP, how specific approaches may address one or more areas of development<sup>(32)</sup>, such as communication and social inclusion, and effective engagement and partnership with parents and carers.

CPD can include a wide range of activities such as self-directed learning, mentoring and coaching, discussion and collaboration with colleagues, internal and external training courses, such as the AET Programme, and studying for accredited qualifications. It is essential that all those working within a setting receive basic awareness training in autism as autism affects the way in which CYP understand and interact with their environment and other people. This should be included as part of the induction programme for new governors and all staff and focus on understanding autism as a difference rather than a deficit. At a specialist level, professional development should support the skills and knowledge needed for staff to take a lead role in coordinating the support of CYP in their setting (e.g. having a lead autism practitioner or autism champion<sup>(33)</sup>). Having an identified lead for autism would enable a more coordinated approach between staff, CYP, families and other services whilst providing ongoing opportunities for identifying and meeting professional development needs within a setting.

## SEND Code of Practice recommends

*“The local authority must set out information in its Local Offer on: Securing expertise among teachers, lecturers or other professionals to support children and young people with SEN or disabilities – this should include professional development to secure expertise at different levels” (p.68)*



## Links to the Teacher Standards

All teachers must take responsibility for improving teaching through appropriate professional development as part of fulfilling their wider professional responsibilities.

## Links to the AET Standards and Competency Frameworks

### Early Years

- see the AET *Early Years Competency Framework* for staff working in Early Years.

### Schools 5 to 16

Section Two, Building relationships, Standards 3 and 7

Section Three, Curriculum and learning, Standard 5

Section Four, Enabling environments, Standards 7 and 10

- see the AET *Schools Competency Framework* for staff working with CYP 5 to 16 years.

### Post-16

Section Two, Building relationships, Standard 10

Section Three, Curriculum and learning, Standard 10

Section Four, Enabling participation, Standard 2, 7, 8 and 9

## Links to the Case Studies report

**Case study B:** The setting is a mainstream academy for children aged 3–11 years. A whole school ethos has been developed and visual prompts are used throughout the school to remind staff on how to enable communication. A coaching model is used to support staff in developing their practice.

**Case study D:** The setting is a primary special school for autistic children aged 3–11 years. There is a strong commitment to whole school training and to having a highly trained staff who then train staff across the school.

**Case study E:** This is a secondary mainstream school for pupils aged 11–16 years. The school employs its own Educational Psychologist, Speech and Language Therapists and a Psychotherapist to address the needs of pupils with SEND, including pupils with autism. In addition to individual assessment and therapy work, these professionals work with groups of pupils and also train the staff who attend the groups.

**Case study H:** This is a mainstream primary school for children aged 3–11 years which has a unit for 10 children with moderate learning difficulties. Training for all the staff was given high priority and this was seen as crucial to the success of the work done in enabling a four-year-old autistic child to be successfully included.



## Principle Five: Leadership and Management that promotes and embeds good autism practice

### Key points

- Leaders create an inclusive educational environment through changing attitudes and behaviours towards CYP with SEND, including autistic CYP.
- Leaders enact their statutory obligation to create enabling environments through making reasonable adjustments. Learning and working environments that do not accommodate such differences will disable young people on the autism spectrum.
- Leaders recognise the needs of autistic CYP and take proactive steps to reduce formal and informal exclusions.
- Leaders promote the use of the AET National Standards to identify areas of good autism practice and areas that need development (e.g. Early Years, School or Post-16 settings use this information as part of the development plan for the setting).

### Why is this principle important?

The Salamanca Statement<sup>(1)</sup> was influential in broadening the aim of inclusive education to eliminate exclusionary processes that are a consequence of attitudes and responses to diversity in race, social class, ethnicity, religion, gender and attainment, as well as to disabilities. Within England, the Equality Act<sup>(2)</sup> established the right of all children and young people not to be discriminated against, both within and outside of education. All responsible bodies, including Early Years, Schools and Post-16 settings have a duty to treat disabled CYP as favourably as their non-disabled peers. They must make reasonable adjustments for disabled CYP to ensure they are not disadvantaged. This duty requires settings to be reformed in ways that will lead settings to respond positively to learner diversity and not to see individual differences as problems to be fixed.

This is of particular importance for autistic CYP given the figures on the number of exclusions from educational settings in England<sup>(3)</sup>. Data obtained from the Department for Education showed that the exclusions for autistic CYP rose by 59% between 2011–2016 compared to a rise in overall exclusions of 4% over the same period. Every region in England has seen an increase of between 45% and 100% in the last five years, whilst overall exclusion rates have fallen in some regions such as the South East. Figures show that whilst children and young people on the autism spectrum represent only 1.7% of the total school population, they account for 2.5% of all exclusions in England.

The development of inclusive practices requires all staff to work together to address barriers to education experienced by learners. Their beliefs, attitudes, and actions create the contexts in which all CYP are able to participate and learn<sup>(4)</sup>. Changing outcomes for vulnerable groups is unlikely to be achieved unless there are changes in the understanding, attitudes and actions of adults. Consequently, the starting point must be with staff members: in effect, increasing their capacity to imagine what might be achieved and enhancing their sense of accountability for bringing this about. It is the responsibility of leadership and management to embed such change within settings and to uphold statutory requirements regarding all CYP with SEND<sup>(2,5,6)</sup>.

Numerous studies have highlighted the significant role that leadership plays in increasing educational effectiveness<sup>(7,8,9,10)</sup>. A key task for leaders is therefore to develop education systems within which staff feel supported and challenged to explore effective ways of



facilitating the learning of all CYP. Within this, there must be a focus on restructuring the cultures, policies and practices in settings so that they respond to the diversity within the population of CYP on the autism spectrum. This recognises the right to inclusion, participation and achievement within education and the critical need to reduce the number exclusions for this group.

## Literature and research evidence that supports Principle Five

In England, children can be excluded from school temporarily or permanently and, despite the fact that it is illegal for children to be excluded on the basis of their diagnosis, children with SEND account for 70% of permanent school exclusions each year<sup>(11)</sup>. A report based on qualitative data collected from nine autistic students who had attended mainstream schools said that exclusion had adversely affected their mental health and that the failure to include them in the school was down to limited teacher knowledge, a failure to make adjustments to the physical environment and little understanding of their specific needs<sup>(12)</sup>. When girls on the autism spectrum were interviewed about their exclusion from school, they identified three aspects that would enhance inclusion. The first was adaptations to the school environment, with a preference for provision that was accepting of their needs and which sought to alleviate barriers. The second was the promotion of strong peer relationships to avoid social isolation. The third was to promote flexible, approachable and accepting attitudes of all staff<sup>(13)</sup>.

## Implications for practice

Good autism practice means that leadership and management have a commitment to inclusive values and to meeting the needs of all CYP on the autism spectrum within their settings. Enabling environments through making reasonable adjustments is a statutory obligation in disability law<sup>(2)</sup>. Leadership and management, including the governing body, must ensure that this is applied to autistic CYP. They have a responsibility to establish an inclusive culture and ethos towards autism through influencing the attitudes and beliefs of staff, CYP, their families and the wider community. For example, delivering a whole school assembly on autism, inviting autistic speakers to present, or creating a lead practitioner role to lead and coordinate autism support across their setting. Having high expectations for all learners and a strong commitment to equal opportunities means that leadership and management enable staff to proactively meet the needs of autistic through making reasonable adjustments in their practice. This requires a commitment to an ongoing programme of CPD so that staff members have the appropriate skills and knowledge to support CYP on the autism spectrum.

To ensure that actions are integrated, sustained and monitored for impact, it is important that a commitment to addressing the needs of autistic CYP is referenced within improvement plans, policies and practice. For example, leaders and managers can use the AET autism standards<sup>(14,15,16)</sup> to identify areas of good autism practice and areas that require development, and then use this information as part of the development plan or Equality Duty objectives for their setting. Specific consideration must be given to the management and reduction of exclusions. Leaders and governing bodies must be aware of the different forms of disability discrimination and their setting's legal duties under the Equality Act (2014). For example, sharing and discussing the AET's *Guide to help Governing Bodies comply with equality law when considering a Head Teacher's decision to exclude an autistic pupil* at a full Governors meeting<sup>(17)</sup>. In considering whether exclusion is an appropriate and proportionate measure and whether alternatives have been explored, they must understand how autism affects an individual CYP (including levels of anxiety and stress) and whether reasonable adjustments have been made to support them.



## SEND Code of Practice recommends

*“The leaders of Early Years settings, Schools and Colleges should establish and maintain a culture of high expectations that expects those working with children and young people with SEND to include them in all the opportunities available to other children and young people so they can achieve well. There is a significant overlap between children and young people with SEN and those with disabilities and many such children and young people are covered by both SEN and equality legislation” (p.27).*

## Links to the Teacher Standards

The Teachers’ Standards set a clear baseline of expectations for the professional practice and conduct of teachers and define the minimum level of practice expected of teachers in England. Leadership and management should use the Teacher Standards to improve standards of teaching, by setting minimum expectations and assessing performance against them.

## Links to the AET Standards and Competency Frameworks

### Early Years

- see the AET Early Years Competency Framework for staff working in Early Years which sets out the knowledge and skills needed by staff when working with autistic CYP.

### Schools 5 to 16

- see the AET Schools Competency Framework for staff working with CYP 5 to 16 years which sets out the knowledge and skills needed by teaching staff when working with autistic CYP.

### Post-16

- see the AET Post-16 Competency Framework for staff working with CYP 16 to 25 years which sets out the knowledge and skills needed by teaching staff when working with autistic CYP.

## Links to the Case Studies report

**Case study A:** The setting is a mainstream primary school and details are given on how a whole school consensus was developed on how to understand and communicate with a very anxious eight-year-old autistic boy.

**Case study B:** The setting is a mainstream academy for children aged 3–11 years. Senior staff maintain that it is the people and practice that have to change (and not the pupils) and illustrations are given on how they achieve this.

**Case study E:** The setting is a mainstream secondary school for pupils aged 11–16. The Director of Curriculum support, Gareth Morewood, has been instrumental in attracting different professions to be employed directly at the school and to create links with other professionals and researchers outside the school to inform and enhance practice and inclusion.



## Principle Six: An ethos and environment that fosters social inclusion for children and young people on the autism spectrum

### Key points

- Reasonable adjustments are made to remove barriers to participation and that enable autistic CYP to access the curriculum, break and lunchtimes, extra-curricular activities, residential trips, work experience or exams.
- Learning environments are structured, understandable and predictable. This includes providing a clearly organised environment, a variety of means to communicate with CYP on the autism spectrum and an environment that encourages and facilitates communication.
- Policies and proactive strategies are in place to reduce the increased risk of bullying to CYP on the autism spectrum and to minimize possible adverse effects to peers.
- Autistic CYP are supported to develop positive relationships with their peers. Developmentally appropriate autism awareness sessions are delivered to peers to increase understanding and promote a supportive attitude to CYP on the autism spectrum.
- Staff consider the accessibility of the learning environment for autistic CYP by taking into account potential physical barriers and sensory processing difficulties as well as social demands of working with or being with their peers.

### Why is this principle important?

The United Nations Convention on the Rights of the Child<sup>(1)</sup> states that children who are disabled should be educated in a way that their disability is understood and that works towards them achieving the fullest possible social inclusion. This means enabling them to participate effectively in economic, social, political and cultural life, as well as living in a society that promotes equality and diversity. Social inclusion is important because all CYP have a right to a good education, to feel valued, to have the opportunity to fulfil their potential and take part in educational opportunities with their peers. Children and young people on the autism spectrum are more vulnerable to being excluded from their education<sup>(2)</sup>, from services or socially from or by their peers, often leaving them isolated within their educational and wider community. This affects both the quality of life of individuals and the equity and cohesion of society as a whole<sup>(3)</sup>. For example, socially excluded autistic individuals are more prone to physical and mental health problems, early withdrawal from education, social isolation and long-term unemployment<sup>(4)</sup>.

Peer relationships and those between autistic CYP and staff, are critical in promoting social inclusion and well-being by helping to engender a sense of belonging to and liking of a school, college or an Early Years setting. The quality of these relationships has been shown to be a protective factor against social exclusion and feelings of loneliness and isolation<sup>(5)</sup>. For autistic CYP, the challenges in forming and maintaining friendships increase the potential vulnerability to social exclusion<sup>(6,7)</sup>.

The increased risk of social exclusion for autistic CYP through bullying – including physical, verbal and cyber-bullying – has been well documented. Figures for the number of autistic CYP being bullied at school range between 40% and 82%<sup>(8,9)</sup>. This data could be an underestimate of the issue as not all of these CYP may be aware when they are being bullied





or may not be able to report this<sup>(10)</sup>. The long-term effects of this are considerable as CYP who are bullied are at higher risk of poor academic progress, non-attendance and mental health problems<sup>(11)</sup>.

## Literature and research evidence that supports Principle Six

The frequency of bullying experienced by autistic CYP is higher than that experienced by non-autistic peers<sup>(12)</sup> but the exact rates of bullying across studies vary because of methodological differences<sup>(13)</sup>. A systematic review of the literature reported high rates of bullying and school victimisation<sup>(13)</sup>, but these figures may be an underestimate as some children do not report incidents because of a perceived lack of action by teachers to resolve issues<sup>(14)</sup>. This finding may be supported by data suggesting that teachers may be less aware of bullying and victimisation compared to parents<sup>(15)</sup>. Autistic CYP with co-occurring difficulties and in mainstream settings without specialist support, are at the highest risk of bullying<sup>(16)</sup>, as are those autistic CYP who actively seek out social interactions<sup>(15)</sup>.

A review of the literature on bullying that explored trends in research, drew a number of conclusions as to how schools could improve their practice<sup>(17)</sup>. The social challenges that autistic CYP face were seen as key and teaching staff should receive training on autism and how to facilitate and support lasting peer relationships. In addition, all staff need to be onboard when implementing an anti-bullying intervention. Teachers should focus their attention on playground supervision, classroom management and being consistent in enforcing anti-bullying rules, as well as carefully restoring relationships between peers when bullying occurs<sup>(17)</sup>.

Developing friendships and peer relationships are ways to discourage bullying and promote social and emotional development<sup>(18)</sup>. A review of the autism and friendship literature has suggested that autistic CYP on the autism spectrum may have the lowest rates of friendship compared to both non-autistic children and other disability groups. They meet friends less often outside of school and friendships are often not maintained beyond school<sup>(19)</sup>.

Gender differences have also been reported: autistic girls may be less socially excluded than autistic boys but still face social exclusion or exclude themselves, as they do not identify with the interests and conversations of their neurotypical peers<sup>(20)</sup>. The authors conclude that there are gender differences in the way social interaction is constructed and the skills needed to gain access to social groups<sup>(20)</sup>.

The last ten years have seen an increase in research demonstrating the effectiveness of interventions to promote peer relationships<sup>(21,22,23)</sup>. There have been five key areas which peer intervention approaches have addressed<sup>(21)</sup>:

1. Building social understanding and skills of autistic CYP
2. Improving the attitudes and knowledge of peers
3. Addressing the support structures implemented by teachers
4. Improving school-wide efforts and knowledge
5. Engaging families in the process.

A review of the research literature has shown that the evidence for promoting social interaction is strong, and that beneficial effects are maintained over time and generalise to other areas<sup>(22)</sup>, although it is important to note that the majority of this research has been conducted with individuals in mainstream settings<sup>(23)</sup>. Research from the US on the



impact of being a non-autistic peer in these programmes, suggests that participation does not have a negative effect on their social status within the school<sup>(24)</sup> and research from Greece has shown that the inclusion of autistic CYP in classrooms has a beneficial effect on the attitudes and intentions of non-autistic peers<sup>(25)</sup>. Lastly, the increased use of new technologies within and outside of school has been highlighted as an opportunity to develop peer relationships<sup>(21)</sup>. It is important in all of this to establish the social preferences of the autistic CYP and then to work towards enabling the type and frequency of social contact they would like from peers.

Structured teaching (e.g. having a clear, consistent routine and environment which is understood by the autistic CYP) continues to be one of the pillars in autism education worldwide. Autistic CYP have suggested that the design of classrooms is particularly important in terms of their ability to learn<sup>(28)</sup> and that modifications to the environment may be related to the frequency of behaviours of concern<sup>(29)</sup> and increased participation<sup>(30)</sup>. Guidance on elements to consider when designing a school or classroom have been compiled<sup>(31)</sup>, which include: proper placement of the visual timetable; reducing visual distraction and controlling lighting; creating spaces which provide a sense of calm; having a quiet room or space for time alone; and adequate storage for their possessions. The opinions of autistic CYP are crucial when considering school design<sup>(32)</sup>.

## Implications for practice

Good autism practice means settings are aware of the increased risk of social exclusion for autistic CYP and have proactive strategies in place to support their inclusion and to develop peer understanding and friendships. This requires a multilayered approach based on improved autism awareness for everyone within the setting, strong partnerships with parents and the local community and implementing strategies that enable autistic CYP to engage socially and be better understood by their peers. Social inclusion requires settings to make reasonable adjustments and to adapt systems and structures to remove barriers to participation<sup>(33)</sup>. This will include, for example, additional planning and accommodation to enable individuals to access and enjoy break and lunchtimes, extra-curricular activities, residential trips, work experience and exams<sup>(34)</sup>. This may require adaptations to the curriculum or physical environment and in the attitude, expectations and language of staff. The SPELL approach (Structure, Positive approach and expectations, Empathy, Low arousal and Links) developed by the National Autistic Society is a useful framework to consider for the development of environments and for thinking more widely about what society needs to do to become a place where autistic individuals can feel comfortable and accepted<sup>(35)</sup>.

A whole setting priority should be around the development of effective anti-bullying policies and practice. Anti-bullying policies are most effective when all school staff understand the principles and purpose of the school's policy, its legal responsibilities, how to resolve problems and where to seek support<sup>(36)</sup>. Leadership and management should ensure that staff are given information and training to raise the profile of this issue for autistic CYP and integrate it into their practice. For example, using the Anti-Bullying Alliance materials on bullying and autism to inform the settings anti-bullying strategy<sup>(37)</sup>.

CYP on the autism spectrum will need specific guidance on how to recognise the signs of bullying and what they should do if they feel they, or others, are being bullied. This should include information on cyber-bullying and how to stay safe online as well as understanding how their own actions may impact on the learning and feelings of others<sup>(38,39)</sup>. Some settings have a system where children can report incidents to staff anonymously via an online site, which is likely to increase the reporting rates. The implementation of approaches to



develop the mutual understanding, communication and support between CYP on the autism spectrum and their peers will help promote social inclusion and lessen the risk of bullying (e.g. introducing peer-mentoring programmes<sup>(36,40)</sup>, autism awareness sessions or setting up lunchtime clubs based on shared interests).

## SEND Code of Practice recommends

*“Public bodies, including further education institutions, local authorities, maintained schools, maintained nursery schools, academies and free schools are covered by the public sector equality duty and, when carrying out their functions, must have regard to the need to eliminate discrimination, promote equality of opportunity and foster good relations between disabled and non-disabled children and young people” (p.17).*

## Links to the Teacher Standards

Teachers should establish a safe and stimulating environment based on mutual respect and consistently demonstrate the positive attitudes, values and behaviour which are expected of learners. This includes having a secure understanding of how a range of factors can inhibit an individual’s ability to learn, and how best to overcome these.

## Links to the AET Standards

### Early Years

Section Two, Positive relationships, Standard 2

Section Three, Learning and development, Standard 2

### Schools 5 to 16

Section One, The individual pupil, Standards 2 and 8

Section Two, Building relationships, Standard 9

### Post-16

Section One, The individual, Standards 8 and 9

Section Two, Building relationships, Standards 3, 4, and 5

## Links to the Case Studies report

**Case study B:** The setting is a mainstream academy for children aged 3–11 years. A number of different safe spaces have been created and these are described, explaining how these aim to address the needs of some of the autistic children on roll.

**Case study D:** This is a primary special school for autistic pupils aged 3–11. The whole environment has been designed with the needs of autistic young people in mind and with input from the staff.

**Case study F:** This is a community all age special school for pupils aged 3–19 years. The staff make detailed assessments of the pupils’ sensory needs and have developed strategies to address these. The school is also enhancing their knowledge and practice in relation to autistic girls.



## Principle Seven: Targeted support and measuring progress of children and young people on the autism spectrum

### Key points

- When assessing progress towards learning goals, data to be collected on social and emotional awareness, communication, social understanding and inclusion, daily life skills, independence and autonomy (working in partnership with parents, carers and other professionals).
- A graduated approach and the 'Assess, Plan, Review and Do' cycle should ascertain the process and quality of the learning experience (not just outcomes) from the perspective of the autistic CYP.
- ICT (Information and Communication Technology) to be used as a tool for communication and leisure for autistic CYP and to enhance their learning experience.
- Autistic CYP given opportunities to increase their independence and facilitate their transition to adulthood (e.g. develop and practice their knowledge and skills in a range of real life situations in the community and the workplace).

### Why is this principle important?

The DfE provides statutory requirements for the curriculum delivered in Schools and Early Years settings as well as non-statutory guidance for providers of 16–19 education<sup>(1,2,3)</sup>. The guidance recommends providing a balanced and broadly based curriculum that should promote the spiritual, moral, cultural, mental and physical development of children and young people. This recognises the need to promote teaching and learning that gives CYP the full range of knowledge and skills that provide the right foundation for good future progress through education and prepares them for the opportunities, responsibilities and experiences of later life. This is critical for autistic CYP given that they are at higher risk of exclusion, bullying and poor mental health and that only 16% of autistic adults in the UK are in full-time paid employment, and only 32% are in some kind of paid work<sup>(4)</sup>.

Given the nature of autism, and taking individual abilities and needs into account, it is likely that autistic CYP will require support in a range of areas outside of the national curriculum. This may include developing the skills, knowledge and understanding necessary to be able to: communicate effectively in social situations and develop and maintain relationships; predict and manage change; access the curriculum and achieve educational outcomes in line with their potential; adapt and manage their environment to lessen the impact of sensory processing issues; regulate emotions; understand their diagnosis and generalise the skills learned in the classroom, home or community.

The SEND Code of Practice states that settings should use a graduated approach to meet the needs of children and young people with a SEN<sup>(5)</sup>. Support should arise from a four part cycle of 'Assess, Plan, Review and Do', where earlier decisions and actions are revisited, refined and revised, leading to a growing understanding of individual needs, progress and strategies to support a child or young person<sup>(6)</sup>. It is important that settings use this approach to identify strengths and where gaps and barriers to learning currently exist for children and young people on the autism spectrum. Too often this stage is missed out leading to either inappropriate or no interventions and a lack of understanding of how needs could be met through high quality and suitably differentiated quality first teaching within the classroom.



## Literature and research evidence that supports Principle Seven

A limitation of the education system is that without knowledge of autism, staff often apply their understanding of general education to autistic learners, rather than making adjustments<sup>(7)</sup>. There is a need for increased awareness on how to adapt assessment methods to reflect the particular strengths and learning style of autistic CYP<sup>(7)</sup>. There is also a need to develop assessment tools that can measure well-being and quality of life for both researchers and practitioners<sup>(8)</sup>. Research studies on outcome tend to measure attainments, severity of autism, and intellectual ability but rarely ask if the intervention has led to increased well-being or happiness. Vermeulen<sup>(9)</sup> argues for the need to develop a measure of happiness. The future collection of assessment data could benefit from shifting away from paper-based forms to the use of technology to store data and track progress<sup>(10)</sup>.

It is well known that, although it is a priority for many autistic people, the prospects of finding and maintaining paid employment are often limited<sup>(11)</sup>. Improvements need to be made in giving appropriate advice to autistic CYP on exam choices, college and university courses, and then on employment that is likely to work. Too often, parents and CYP are left to determine these important decisions on their own and so take options that do not play to their strengths or lead to good outcomes. The importance of work experience has been identified as one of the barriers to autistic CYP accessing later employment<sup>(12)</sup>. A report by the Autism Education Trust<sup>(13)</sup> made a specific recommendation for teaching staff to facilitate access to work experience to help gain information on suitable options later. Beyond employment, there is a need to facilitate access for autistic CYP to engage with a range of community activities by making reasonable adjustments to the sensory and social environment and finding befrienders to support them<sup>(14)</sup>.

### Implications for practice

Good autism practice means that settings provide a flexible curriculum that promotes social inclusion, well-being and prepares autistic CYP for transitions between educational stages and into FE or the workplace. This should ensure that all learning environments and teaching methods are adapted to enable learners on the autism spectrum to participate and succeed in both academic and non-academic areas. Such an approach could benefit other learners without lessening the importance, or the impact, of strategies for CYP on the autism spectrum. An example would be a whole class approach to using the zones of regulation to identify and monitor emotional well-being. Another would be the use of visuals to support an understanding of the order of daily activities for all learners. This requires teaching staff to take responsibility for the teaching and learning of all autistic CYP in their class, including planning the work of support staff. This would allow more opportunities for direct teacher input rather than educating autistic CYP with TAs outside the classroom<sup>(15)</sup>.

As part of the graduated approach, settings must embed effective assessment processes to identify progress for CYP on the autism spectrum across non-academic areas as well as on attainments in academic areas. This can include, for example, using the AET Progression Framework to identify the impact of a social communication programme for learners in a secondary school<sup>(16)</sup>. Rather than focusing solely on outcomes, staff should actively involve autistic CYP as part of the 'Assess, Plan, Review and Do' cycle to improve understanding of the learning experience from their perspective<sup>(6)</sup>. This process will be enhanced through engagement with parents, carers and other services such as Speech and Language Therapy, Autism Advisory Team and Educational Psychology.

There should be a focus on identifying and addressing barriers to learning in areas such as communication, play, social understanding and sensory issues. Many of these may be



addressed through quality first teaching and making reasonable adjustments<sup>(17)</sup> whilst others may require ‘small step’ planning and more personalised support. This may involve the use of specific interventions or approaches identified through the ‘assess’ stage of the graduated approach. Staff should draw on the latest research about the likely impact of particular interventions<sup>(18)</sup> and consider the views of children and young people as part of this process<sup>(19)</sup>. A priority should be on developing their sense of agency and ability to carry out tasks with lessening support from adults whilst providing appropriate scaffolds and strategies to achieve this. Technological advances have opened up many new possibilities in this regard. Educational applications on iPads can be adapted to accommodate different learning styles, for example, whilst the number of repetitions of material to be learned, the quantity and type of scaffold to support learning, and the level of difficulty, can all be adjusted automatically based on the learner’s response<sup>(20)</sup>.

## The AET Progression Framework for Schools

The content of the AET Progression Framework (PF) is divided into seven main areas based on the findings of the literature review and consultation. The PF can be downloaded from the AET website and currently work is ongoing to create this on an application for smartphones. The seven areas relate closely to autism ‘differences’ and the impact of these on the CYP’s social, emotional and learning needs, their independence and community participation. The main areas are:

- Social Communication
- Social Interaction
- Social Imagination / Flexibility
- Sensory processing
- Emotional understanding and self-awareness
- Learning
- Independence and community participation.

A key feature of the AET Schools PF is a focus on the individual CYP and the facility to set specific priorities and evaluate progress based on individual learning needs with a recognition that CYP may have uneven or ‘spiky’ profiles with varying abilities across areas. It is very important that the Progression Framework is NOT seen as a checklist of skills to be worked through. One of the aims of the PF is to provide a starting point for identifying individual priorities in consultation with key people, including parents and the CYP themselves. As part of this ‘learning conversation’ ways in which CYP can be supported towards achieving priorities (e.g. provision planning) need to be set out.

## SEND Code of Practice recommends

*“Early years providers, schools and colleges should know precisely where children and young people with SEN are in their learning and development. They should ensure decisions are informed by the insights of parents and those of children and young people themselves; have high ambitions and set stretching targets for them; track their progress towards these goals; keep under review the additional or different provision that is made for them; promote positive outcomes in the wider areas of personal and social development, and ensure that the approaches used are based on the best possible evidence and are having the required impact on progress” (p.25).*



## Links to the Teacher Standards

Teachers must have a secure understanding of how a range of factors can inhibit pupils' ability to learn, and how best to overcome these. This includes making use of formative and summative assessment to secure pupils' progress and using relevant data to monitor progress, set targets, and plan lessons.

## Links to the AET Standards

### Early Years

Section One, Unique child, Standards 1 to 4

Section Three, Learning and development, Standard 3

### Schools 5 to 16

Section Three, Curriculum and learning, Standards 6 and 7

### Post-16

Section Three, Curriculum and learning, Standards 6 and 9.

## Links to the Case Studies report

**Case Study B:** The setting is a mainstream academy for children aged 3–11 years. This case study describes the ways in which staff ascertain the strengths and the challenges of the autistic pupils from early years to when they leave at 11, and make adjustments accordingly.

**Case study D:** This is a primary special school for autistic children aged 3–11 years. The school initially operated a subject-based curriculum but realised this was not meeting the needs of their students or leading to success. Staff identified they had three types of learner which they characterised as leaves, trunks and roots. The curriculum was therefore modified into these three strands. These are described in the case study.

**Case study F:** This is a community special school for pupils aged 3–19 years. The school measures the impact of their interventions through a series of questionnaires. Learning objectives are printed on students' work using symbols and words. The school uses MAPP (Mapping and Assessing Personal Progress), a suite of materials developed by Mike Sissons at the Dales School in North Yorkshire. The case study also gives details of how students' work is accredited by external bodies, such as ASDAN.



## Principle Eight: Adapting the curriculum, teaching and learning to promote well-being and success for children and young people on the autism spectrum

### Key points

- Staff provide a broad and balanced curriculum that addresses not only the learning needs of CYP with autism (including preferred styles of learning and uneven ability profiles) but also addresses their social, emotional well-being, communication needs and life skills.
- Staff consider how to reduce the academic pressures on autistic CYP when needed, especially around tests and public examinations. This includes ensuring that appropriate adjustments and accommodations are applied for and made (see the AET exam accommodations guidance).
- The emotional well-being of CYP on the autism spectrum is monitored and prioritised alongside their academic progress. (e.g. CYP are taught about staying safe, sex, gender and relationships, online safety and bullying, using autism friendly materials and resources).
- Staff work with CYP, their families and other services to identify triggers for anxiety and stress (e.g. staff observe and assess the potential sensory challenges, both indoors and outdoors, and consider how to address these).
- CYP on the autism spectrum are taught how to identify, understand and regulate their emotional state.
- Staff understand the potential vulnerability of CYP on the autism spectrum to abuse and neglect (e.g. staff have specific training on safeguarding CYP on the autism spectrum).

### Why is this principle important?

Schools, colleges and Early Years settings have an important role to promote positive well-being and good mental health for all children and young people<sup>(1)</sup>. The DfE identifies the need for a consistent whole school approach and early intervention to identify issues and provide effective support<sup>(2)</sup>. The Green Paper, *Transforming Children and Young People's Mental Health Provision*<sup>(3)</sup> details ambitious, transformational proposals to provide earlier support for children and young people's mental health, working closely with schools and colleges. This is critical for autistic CYP. Current research indicates that from a young age through to later adult life, autistic individuals are more likely to have a mental health condition and experience poor mental health than the general population. Data indicates that up to 46% of children on the autism spectrum aged between 3 and 16 years had at least one comorbid mental health condition<sup>(4)</sup>; within the group aged 10 to 14 years, the rate was up to 70%. Furthermore, the prevalence of co-morbid mental health conditions is higher for those children on the autism spectrum who also have an intellectual disability<sup>(5)</sup>. Anxiety and depression are the most common mental health issues experienced<sup>(6)</sup>. However, it is difficult to determine the true rates of depression and anxiety in autistic people as many features of autism (e.g. social withdrawal, sleep problems) overlap with symptoms of depression and anxiety, so it may be difficult to diagnose<sup>(7)</sup>.

The reasons for the mental health issues seen in autistic CYP are complex and may include both genetic and environmental factors, such as social exclusion, bullying, and experiencing criticism and stigma<sup>(8)</sup>. While every person on the autism spectrum experiences life in their





own individual way, to a greater or lesser degree the experience of dealing with neurotypical physical, sensory and social environments means that autistic CYP and their families can be more susceptible to stressors that may trigger mental health problems. Differences in communication can also make it more difficult for them to seek and obtain help, which can perpetuate mental health issues.

## Literature and research evidence that supports Principle Eight

As was noted earlier, CYP on the autism spectrum are at much higher risk of mental health difficulties<sup>(9)</sup> particularly of anxiety and depression<sup>(10)</sup>. There is an increasing understanding that the curriculum for autistic CYP should be diversified to work on emotional understanding and regulation and mental health<sup>(11)</sup>. When considering the curriculum, there are a number of areas to consider. Research has suggested that autistic CYP may use social media less than other disability groups and engage in more non-social live video games and television<sup>(12)</sup> but when they do engage in social media, they report positive relationships<sup>(13)</sup>. However, as with all children, there is a need to protect CYP on the autism spectrum online to prevent cyber-bullying<sup>(14)</sup> and develop useful guidance for autistic people and their families<sup>(15)</sup>

A UK survey showed that autistic adults were more sexually naïve than non-autistic adults, possibly as a result of reduced social networks, and were more likely to be exposed to sexual victimisation and abuse<sup>(16)</sup>. CYP and parents can benefit significantly from programmes designed to improve knowledge on sex and relationships<sup>(17)</sup> and these should be proactive rather than reactive<sup>(18)</sup>. Research has noted that the empirical evidence in support of a particular curriculum for sex education has not been developed and practitioners are typically using training programmes or their own knowledge to deliver this education. In addition, there remains little guidance on how to adapt existing sex education curricula to make it more accessible and relevant to autistic CYP. There is a growing literature on the issues involved in sex and relationships written by autistic individuals<sup>(35,36)</sup> and by those who have led groups for autistic young people<sup>(37)</sup>. Despite these limitations, it is clear that sex and relationship education is one strategy for reducing the risks of abuse and improving quality of life<sup>(18)</sup>.

It has been increasingly argued that autistic people struggle to identify with and regulate their emotional response to environmental changes and have extreme reactions that are harder to control than for their typical peers<sup>(19)</sup>. Staff need to teach autistic CYP to identify the messages their body is giving and then to use strategies to regulate their emotions such as deep breathing or listening to music or using an application such as Headspace<sup>(20)</sup>. This approach is aligned with the work of authors promoting the use of a low-arousal approach, as they suggest that individuals on the autism spectrum may have extreme reactions to their sensory environment<sup>(21)</sup>. Mindfulness is another technique that has been used effectively to help a young autistic girl understand her physiological stress responses to daily challenges<sup>(22)</sup>.

A feature of mental health research over the last five years, particularly in relation to anxiety, has been the growing number of studies that have reported evidence in support of Cognitive Behavioural Therapy (CBT)<sup>(23,24,25)</sup>. One study<sup>(24)</sup> showed that CBT helped autistic children during school break times, with reductions in social isolation and increases in the frequency of positive interactions. Despite the success of these studies, more research is still needed to understand how anxiety differs across different intellectual levels and how CBT could potentially be adapted for autistic children who are less verbally able<sup>(26)</sup>. There are a number of classroom strategies and technology tools (e.g. a phone application called *Brain in Hand*) that CYP on the autism spectrum can use to identify and regulate their emotional state<sup>(27)</sup> but there is little research currently on the effectiveness of these approaches.



There has, however, been a large increase in research on the emotional well-being of parents, particularly mothers<sup>(28)</sup>, and a suggestion that approaches such as mindfulness can be effective in reducing parental stress<sup>(29)</sup>. Evidence suggests that by improving parental well-being one can improve the long-term mental health of all members of the family<sup>(29)</sup>.

Another recent research trend has been the growth of research looking into the beneficial effects of exercise in autism<sup>(30,31,32)</sup> and the reduction in obesity<sup>(33)</sup>, both clear indicators of improved physical and mental health<sup>(34)</sup>. There is a growing need for practitioners across school settings to focus on exercise, nutrition and weight in autistic CYP, given the increased likelihood of a sedentary lifestyle and a more restricted diet.

## Implications for practice

Good autism practice means settings have systems to identify, monitor, build and maintain the mental and emotional well-being of CYP on the autism spectrum. Opportunities exist to develop and promote social and emotional skills through dedicated relationships and sex education (RSE), and personal, social, health and economic education (PSHE), as well as the wider curriculum. This should include programmes of social and emotional learning that have the potential to help children and young people acquire the skills they need to have good mental health and well-being, as well as benefitting their academic progress. Targeted learning opportunities should focus on emotional understanding and regulation across all ages. Furthermore, autistic CYP should be taught – using autism friendly and developmentally appropriate materials – about sex, gender and relationships, friendships, bullying and online safety. Continued professional development programmes should focus on the well-being, good mental health and resilience of children and young on the autism spectrum. This will support staff to prevent, identify and meet needs through effective practice in settings and work with children and young people, their families and specialist services (e.g. Educational Psychology, Autism Advisory Teams, and Child and Adolescent Mental Health Services (CAMHS)).

## SEND Code of Practice recommends

*“Early years providers, schools and colleges should know precisely where children and young people with SEN are in their learning and development. They should: promote positive outcomes in the wider areas of personal and social development” (p.25).*

## Links to the Teacher Standards

Teachers must have a secure understanding of how a range of factors can inhibit pupils’ ability to learn and how best to overcome these. This includes making use of formative and summative assessment to secure pupils’ progress and using relevant data to monitor progress, set targets, and plan lessons.



## Links to the AET Standards

### Early Years

Section Two, Positive relationships, Standard 3

Section Three, Learning and development, Standards 1, 2 and 4

Section Four, Enabling environments, Standards 1 to 4

### Schools 5 to 16

Section One, The individual child, Standard 7

Section Two, Building relationships, Standards 7 and 9

Section Three, The individual child, Standards 1, 4, 7, 8, 10

Section Four, Enabling environments, Standards, 1, 2, 3, 4, 5, 6 and 7

### Post-16

Section One, The individual, Standard 5

Section Two, Building relationships, Standard 7

Section Three, Curriculum and learning, Standards 1, 2, 4, 5

Section Four, Enabling participation, Standards 1, 2, 3, 4, 6 and 10

## Links to the Case Studies report

**Case Study C:** This is a primary special school for autistic children aged 3–11. The school has introduced a number of interventions which the staff feel are very successful for children on the autism spectrum. These include Yoga, a Forest school and outdoor learning, the SCERTS approach, the Attention Autism approach and Colourful Semantics.

**Case study D:** This is a primary special school for autistic children aged 3–11 years. The staff now use Skills Maps to ascertain progress, as well as other measures. These maps form the scheme of work for the children. An example might be a ‘using my hands’ skills map. This starts off with touching textures and builds in a progression all the way up to writing.

**Case study E:** This is a mainstream secondary school for pupils aged 11–16. There is a person on the staff responsible for exploring adjustments for exams and she explains her role and what has helped the autistic children and young people.

**Case study G:** This is a specialist, all age academy for students on the autism spectrum aged 5–19 years. Examples are given on the Key stage 4 curriculum which prepares students aged 16 and over for FE and employment.



## Concluding points

The way in which autistic CYP are understood by others has implications for the approaches taken in Early Years, School and Post-16 settings. The performance and actions of an individual CYP depend very much on the context, in addition to their profile of skills and understanding. One can create an environment where the CYP feels uncomfortable, anxious and excluded or one where they feel relaxed, included and confident, where they can learn. The type of environments created for non-autistic individuals are often very difficult for autistic CYP to operate within. Without knowledge of this fact, and of autism generally, teaching staff and others can unwittingly create serious problems for autistic CYP.

These guidelines have served to give those working in education the key principles that should underpin their work with autistic CYP together with references and real life examples from the eight case studies and published literature. It is hoped that the guidelines will inspire those working with autistic CYP in Early Years, Schools and Post-16 settings to develop their understanding of autism and to make adjustments in their current settings to the teaching as well as the physical, sensory and social environments and to adapt what they offer and how autistic CYP are supported to enable all those on the autism spectrum in their setting to flourish and succeed.

# We help autistic children and young people to have equal opportunities and a positive educational experience that empowers them to achieve their ambitions.

[www.autismeducationtrust.org.uk](http://www.autismeducationtrust.org.uk)

## AET's award-winning autism education training programme includes:

### MAKING SENSE OF AUTISM

Basic autism awareness training for all staff within any education setting (including office staff; governors; caretakers; drivers and escorts).

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Focussed training for staff in a specialist provision to support a pupil with complex needs and aid participation (including development of their personal or EHC plan).

### GOOD AUTISM PRACTICE

Practical knowledge, hands-on tools and techniques for all staff working directly with pupils on the autism spectrum (including teaching assistants; lunchtime staff; teachers).

With optional certification.

### PROGRESSION FRAMEWORK

Introduction to the framework (download free), with key features and guidance on how to use it. Hands on training for all staff involved in setting learning goals and recording progress for pupils.

### EXTENDING AND ENHANCING GOOD AUTISM PRACTICE

Deepens delegates' understanding, including theories of autism. Advancing skills in developing and applying strategies to facilitate progress and achievement, for teachers, teaching assistants and SENDCos.

### LEADING GOOD AUTISM PRACTICE

For staff who may train or lead other staff in their setting, focussing on developing good autism provision.

With optional certification.

## AET AUTISM STANDARDS

A set of standards from the AET, to enable educational settings to evaluate their practice in addressing the needs of children and young people on the autism spectrum.



## AET AUTISM PROGRESSION FRAMEWORK

A comprehensive interactive assessment tool for children and young people on the autism spectrum.



Further information and resources can be found on the AET website at [www.autismeducationtrust.org.uk](http://www.autismeducationtrust.org.uk)

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The AET schools autism progression framework has been developed for the AET by Autism Associates in consultation with a range of partners. Project team: Suzanne Farrell (Team leader), Ruth Fidler, Phil Christie, Linda Lyn-Cook. AET schools autism progression framework. London: AET. Updated 2019

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